

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061388

FILED
May 01, 2007
Secretary of State

Entity Name: HAPSA, INC.

Current Principal Place of Business:

1540 SAN REMO AVE APT 10
CORAL GABLES, FL 33146

New Principal Place of Business:

7782 SW 102 LANE
MIAMI, FL 33156

Current Mailing Address:

9300 S. DADELAND BLVD.
304
MIAMI, FL 33156

New Mailing Address:

PO BOX 580
304
LEICESTER, NC 28748

FEI Number: 65-1114179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, VIOLETA
1540 SAN REMO AVE APT 10
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

REEVES, VIOLETA
7782 SW 102 LANE
MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: REEVES, VIOLETA

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REEVES, VIOLETA
Address: 1540 SAN REMO AVE APT 10
City-St-Zip: CORAL GABLES, FL 33146

Title: STD () Delete
Name: MONTEVERDE, MARTIN
Address: 11060 MARIN ST
City-St-Zip: CORAL GABLES, FL 33156

Title: D () Delete
Name: MONTEVERDE, ERNESTO
Address: 11060 MARIN ST
City-St-Zip: CORAL GABLES, FL 33156

Title: D () Delete
Name: ROBYN, ALEXANDER
Address: 11060 MARIN ST
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REEVES, VIOLETA
Address: 7782 SW 102 LANE
City-St-Zip: MIAMI, FL 33156

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIOLETA REEVES

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date