2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059171

Entity Name: CANAWON CORP.

FILED Jan 16, 2006 Secretary of State

| Current P | rincipal Place | e of Business: | New Prince | New Principal Place of Business: | | |
|---|---|------------------------------------|---|----------------------------------|--------------------------------------|----|
| SUITE #14 | ND NATIONA 18 D, FL 32819 | _ DRIVE | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | |
| SUITE # 14 | ND NATIONA 48 D, FL 32819 | _ DRIVE | | | | |
| FEI Number: | : 27-0016135 | FEI Number Applied For () | FEI Number Not App | licable () | Certificate of Status Desired () | |
| Name and | Address of (| Current Registered Agent: | Name and | Address of | New Registered Agent: | |
| 6208 S. HA | /E RYONG AMPSHIRE CO MERE, FL 347 | | | | | |
| | named entity e of Florida. | submits this statement for the p | urpose of changing i | its registered | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | | |
| | Electro | nic Signature of Registered Age | nt | | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | | |
| OFFICERS | S AND DIREC | TORS: | ADDITION | IS/CHANGE | S TO OFFICERS AND DIRECTOR | S: |
| Title: Name: Address: City-St-Zip: | P, T (WON, PYO 6208 S. HAMP WINDERMERE | | Title: Name: Address: City-St-Zip: | (|) Change()Addition | |
| Title: Name: Address: City-St-Zip: | VP (WON, SUNG J 6208 S. HAMP WINDERMERE | | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | S (SONG, HYE R\ 6208 S. HAMP WINDERMERE | SHIRE COURT | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D (WON, SUNG J 6208 S. HAMP WINDERMERE | SHIRE COURT | Title: Name: Address: City-St-Zip: | (|)Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D (WON, PYO 6208 S. HAMP WINDERMERE | | Title: Name: Address: City-St-Zip: | (|) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | (|) Delete | Title: Name: Address: City-St-Zip: | WON, HOWA | NATIONAL DRIVE, SUITE 148 | |
| I hereby ce | artify that the in | formation supplied with this filir | na does not avalify fo | or the for the c | evenntion stated in Chanter 119 | |

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD O'LENICK D 01/16/2006