2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000033038

Entity Name: HAS GROUP CORP.

FILED Jun 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5811 NW 72 WAY 3691 NW 124 AVE

AMD CORAL SPRINGS, FL 33065

PARKLAND, FL 33067

Current Mailing Address: New Mailing Address:

5811 NW 72 WAY 3691 NW 124 AVE

AMD CORAL SPRINGS, FL 33065 PARKLAND, FL 33067

FEI Number: 56-2370187 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARTHA, DOMINGUEZ R VP

5811 NW 72 WAY

DOMINGUEZ, ALEJANDRO
3691 NW 124 AVE

AMD CORAL SPRINGS, FL 33065 US PARKLAND, FL 33067 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: ALEJANDRO DOMINGUEZ 06/06/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: DOMINGUEZ, ALEJANDRO Name: DOMINGUEZ, ALEJANDRO

 Address:
 5811 NW 72 WAY
 Address:
 3691 NW 124 AVENUE

 City-St-Zip:
 PARKLAND, FL 33067
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: VP (X) Delete Title: () Change () Addition

 Name:
 DOMINGUEZ, MARTHA
 Name:

 Address:
 5811 NW 72 WAY
 Address:

 City-St-Zip:
 PARKLAND, FL 33067
 City-St-Zip:

Title: ST (X) Delete Title: () Change () Addition

 Name:
 HENRY, DOMINGUEZ
 Name:

 Address:
 5811 NW 72 WAY
 Address:

 City-St-Zip:
 PARKLAND, FL 33067
 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: ALEJANDRO DOMINGUEZ P 06/06/2008