## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000130511

Entity Name: HIS HANDS, INC.

FILED Apr 11, 2005 Secretary of State

Durrent Principal Place of Business: New Principal Place of Busines	t Principal Place of Business:	New Principal Place of Busines
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5320 CYPRESS RD 12739 WALTHAM CLOSE PLANTATION, FL 33317 ROSCOE, IL 61073

Current Mailing Address: New Mailing Address:

5320 CYPRESS RD 12739 WALTHAM CLOSE PLANTATION, FL 33317 ROSCOE, IL 61073

FEI Number: 20-0388407 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:

MURPHY-FLETCHER, BARBARA
5320 CYPRESS RD
PLANTATION, FL 33317 US

MURPHY-FLETCHER, BARBARA
12739
ROSCOE,IL, FL 61073 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: 04/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete

Name: MURPHY FLETCHER, BARBARA

Address: 5320 CYPRESS ROAD

City-St-Zip: FORT LAUDERDALE, FL 33317

Title: VP ( ) Delete
Name: FLETCHER, MARK
Address: 5320 CYPRESS ROAD

City-St-Zip: FORT LAUDERDALE, FL 33317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MURPHY FLETCHER, BARBARA
Address: 12739 WALTHAM CLOSE

City-St-Zip: ROSCOE, IL 61073

Title: VP (X) Change ( ) Addition

 Name:
 FLETCHER, MARK

 Address:
 12739 WALTHAM CLOSE

 City-St-Zip:
 ROSCOE, IL 61073

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA MURPHY-FLETCHER P 04/11/2005