2007 FOR PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE!

SIGNATURE AND TYPED OF

Mar 16, 2007 8:00 am **Secretary of State ANNUAL REPORT** DOCUMENT # P04000016041 03-16-2007 90040 047 ***150.00 HANDIWORKS, INC. **50001104** Principal Place of Business Mailing Address 7800 RAMONA STREET 7800 RAMONA STREET MIRAMAR, FL 33023 MIRAMAR, FL 33023 02102007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1488507 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GAMEZ, LUIS M DO NOT WRITE 7800 RAMONA STREET MIRAMAR, FL 33023 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE Р GAMEZ, LUIS M NAME 7800 RAMONA STREET STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL 33023 VP TITLE NAME QUINTANA, YEIMY STREET ADDRESS 7800 RAMONA STREET MIRAMAR, FL 33023 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CJTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-11-07

Daytime Phone #

FILED