2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036605

City-St-Zip:

PLANTATION, FL 33324 US

FILED Apr 24, 2006 Secretary of State

Entity Nai	me: ORGANIZI	ED HARMONY, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	B HILL ROAD				
#453 PLANTATI	ION, FL 33324	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	B HILL ROAD				
#453 PLANTATI	ION, FL 33324	US			
FEI Number:	: 51-0505120	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
GAIL ELLIS LAX, ORGAMI 3RD HARMONY, INC 965 N HOB HILL RD SUITE 453 PLANTATION, FL 33324 US			965 N NOB HILL RD SUITE 453		
	named entity so e of Florida.	ubmits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: GAIL ELLIS LAX				04/24/2006	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () I LAX, GAIL ELLIS 965 N. NOB HILL PLANTATION, FL	. ROAD, #453	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRES () I LAX, ADAM K 965 N. NOB HILL PLANTATION, FL		Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SECR () I SPELLACY, SHA 965 N. NOB HILL		Title: (Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: GAIL ELLIS **PRES** 04/24/2006