2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055835

Entity Name: HALF PRICE MERCHANDISE, INC.

FILED Feb 24, 2006 Secretary of State

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

5423 ANDOVER DRIVE 1018 MAPLEVIEW WAY ORLANDO, FL 32812 ORLANDO, FL 32828

Current Mailing Address: New Mailing Address:

5423 ANDOVER DRIVE 1018 MAPLEVIEW WAY ORLANDO, FL 32812 ORLANDO, FL 32828

FEI Number: 20-0991873 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:

ABOULHOSN, NAJIB
5423 ANDOVER DRIVE
ORLANDO, FL 32812 US

ABOULHOSN, NAJIB
1018 MAPLEVIEW WAY
ORLANDO, FL 32828 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: NAJIB ABOULHOSN 02/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ABOULHOSN, NAJIB
 Name:
 ABOULHOSN, NAJIB

 Address:
 5423 ANDOVER DRIVE
 Address:
 1018 MAPLEVIEW WAY

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:
 ORLANDO, FL 32828

Title: SECR () Delete Title: SECR (X) Change () Addition Name: ABOULHOSN, NAJIB Name: ABOULHOSN, NAJIB

 Name:
 ABOULHOSN, NAJIB
 Name:
 ABOULHOSN, NAJIB

 Address:
 5423 ANDOVER DRIVE
 Address:
 1018 MAPLEVIEW WAY

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:
 ORLANDO, FL 32828

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

 Name:
 ABOULHOSN, NAJIB
 Name:
 ABOULHOSN, NAJIB

 Address:
 5423 ANDOVER DRIVE
 Address:
 1018 MAPLEVIEW WAY

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:
 ORLANDO, FL 32828

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: NAJIB ABOULHOSN P 02/24/2006