2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020502

Entity Name: HANIAD CORPORATION

FILED Apr 28, 2006 Secretary of State

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

1843 THREE SWALLOW WAY
PALM HARBOR, FL 33761 US
1843 TREE SWALLOW WAY
PALM HARBOR, FL 34683 US

Current Mailing Address: New Mailing Address:

1843 THREE SWALLOW WAY
PALM HARBOR, FL 33761 US
1843 TREE SWALLOW WAY
PALM HARBOR, FL 34683 US

FEI Number: 20-2376065 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:

MARTINEZ, HAYDEE
1843 THREE SWALLOW WAY
PALM HARBOR, FL 33761 US

MARTINEZ, HAYDEE
1843 TREE SWALLOW WAY
PALM HARBOR, FL 34683 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: HAYDEE MARTINEZ 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition MARTINEZ, HAYDEE Name: Name: MARTINEZ, HAYDEE 1843 THREE SWALLOW WAY 1843 TREE SWALLOW WAY Address: Address: City-St-Zip: PALM HARBOR, FL 33761 US City-St-Zip: PALM HARBOR, FL 34683 US

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: HAYDEE MARTINEZ DPST 04/28/2006