

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106388

FILED
May 01, 2007
Secretary of State

Entity Name: HANDS-ON EVERYTHING, CORP

Current Principal Place of Business:

2968 CLIPPER COVE LN
APT 101
KISSIMMEE, FL 34741

New Principal Place of Business:

4395 SPRING BLOSSOM DR
KISSIMMEE, FL 34746

Current Mailing Address:

PO BOX 453704
KISSIMMEE, FL 34745

New Mailing Address:

FEI Number: 20-3233624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIGUEROA, JULIAN
1911 REEF CLUB DRIVE
103
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

FIGUEROA, JULIAN
4395 SPRING BLOSSOM DR
KISSIMMEE, FL 34746 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: _____

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FIGUEROA, JULIAN
Address: 1911 REEF CLUB DRIVE #103
City-St-Zip: KISSIMMEE, FL 34741

Title: M () Delete
Name: MONCADA, CARMEN
Address: 2311 SOUTH CONWAY RD APT 602
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIGUEROA, JULIAN
Address: 4395 SPRING BLOSSOM DR
City-St-Zip: KISSIMMEE, FL 34746

Title: M (X) Change () Addition
Name: MONCADA, CARMEN
Address: 4395 SPRING BLOSSOM DR
City-St-Zip: KISSIMMEE, FL 34746

I hereby certify that the information supplied with this filing does not qualify 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: JULIAN FIGUEROA

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date