

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140690

FILED
Aug 02, 2006
Secretary of State

Entity Name: HISPANIC RESEARCH & MARKETING, INC.

Current Principal Place of Business:

1551 NORTHWEST 665TH AVENUE SUITE 4
PLANTATION, FL 33313

New Principal Place of Business:

2101 W. ATLANTIC BLVD.
SUITE #101
POMPANO BEACH, FL 33069

Current Mailing Address:

1551 NORTHWEST 665TH AVENUE SUITE 4
PLANTATION, FL 33313

New Mailing Address:

2101 W. ATLANTIC BLVD.,
SUITE #101
POMPANO BEACH, FL 33069

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

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: HANSEN III, CHARLES L
Address: 1551 NORTHWEST 665TH AVENUE SUITE 4
City-St-Zip: PLANTATION, FL 33313

Title: DVPT () Delete
Name: TOWSLEY, DEBRA L
Address: 1551 NORTHWEST 665TH AVENUE SUITE 4
City-St-Zip: PLANTATION, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: HANSEN III, CHARLES L
Address: 2101 W. ATLANTIC BLVD., SUITE #101
City-St-Zip: POMPANO BEACH, FL 33069

Title: DVPT (X) Change () Addition
Name: TOWSLEY, DEBRA L
Address: 2101 W. ATLANTIC BLVD., SUITE #101
City-St-Zip: POMPANO BEACH, FL 33069

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: JACQUELYN GOGIN

MS.

08/02/2006

Electronic Signature of Signing Officer or Director

Date