

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163882

Entity Name: HWOA, INC.

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

3020 SW 14TH PLACE
4
BOYNTON BEACH, FL 33426

New Principal Place of Business:

8346 7TH PLACE SOUTH
WEST PALM BEACH, FL 33411

Current Mailing Address:

P.O.BOX 211791
ROYAL PALM BEACH, FL 33426

New Mailing Address:

P.O.BOX 211791
ROYAL PALM BEACH, FL 33421

FEI Number: 59-3833470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

1ST PRIORITY FINANCIAL SERVICES
8346 7TH PLACE SOUTH
WEST PALM BEACH, FL 33411 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: DP () Delete
Name: CALZADA, LUIS R
Address: 4831 HOLIDAY WAY APT 152
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: COO () Delete
Name: APASEWICZ, PETER
Address: P.O. BOX 211791
City-St-Zip: ROYAL PALM BEACH, FL 33421 US

Title: COO () Delete
Name: SORIA, LOUIS
Address: P.O. BOX 211791
City-St-Zip: ROYAL PALM BEACH, FL 33421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BENEFITS AUTOMATION, SYSTEMS LLC
Address: 8346 7TH PLACE SOUTH
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PETER APASEWICZ

COO

03/31/2009

Electronic Signature of Signing Officer or Director

Date