2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000053347

Entity Name: THE HUMANITARIAN CORP.

FILED Mar 19, 2012 Secretary of State

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

7208 BEAKRUSH LN 230 E. MONUMENT AVE WINTER GARDEN, FL 34787 SUITE A

KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

7208 BEAKRUSH LN 230 E. MONUMENT AVE WINTER GARDEN, FL 34787 SUITE A

KISSIMMEE, FL 34741

FEI Number: 45-4729352 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:

ANDRADA, EDITHA
7208 BEAKRUSH LN
203

ANDRADA, EDITHA
2408 NIGHTINGALE LANE
KISSIMMEE, FL 34746 US

WINTER GARDEN, FL 34787 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: EDITHA ANDRADA 03/19/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: COB

Name: ANDRADA, EDITHA
Address: 2408 NIGHTINGALE LANE
City-St-Zip: KISSIMMEE, FL 34746

Title: CEO

Name: ANDRADA, GREGORIO
Address: 2408 NIGHTINGALE LANE
City-St-Zip: KISSIMMEE, FL 34746

Title: F

Name: ANDRADA, MAREDITH
Address: 2408 NIGHTINGALE LANE
City-St-Zip: KISSIMMEE, FL 34746

Title: VP

Name: ANDRADA, MARK GREGORY
Address: 2408 NIGHTINGALE LANE
City-St-Zip: KISSIMMEE, FL 34746

Title: S

Name: ANDRADA, EDDIE GREG Address: 2408 NIGHTINGALE LANE City-St-Zip: KISSIMMEE, FL 34746

I hereby 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 all other like empowered.

SIGNATURE: EDITHA ANDRADA COB 03/19/2012