2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2006 08:00 AM Secretary of State *DOCUMENT # P95000067811 TREASURED HANDS, INC. Principal Place of Business Mailing Address 5219 AVENIDA NAVARRA 5219 AVENIDA NAVARRA SARASOTA, FL 34242 SARASOTA, FL 34242 No Chg-P CR2E034 (11/05) 04262006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0604640 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 8. Name and Address of Current Registered Agent BOOTY, BEVERLY W DO NOT WRITE 2324 BRADFORD STREET SARASOTA, FL 34231 IN THIS SPACE 3. 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. I am lamiliar with, and accept the obligations of registered agent. Signature, typed or precediname of registered agent and tria if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Dection Campaign Financing \$5.00 May Be FILE NOWIN FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$350.00 Added to Fees OFFICERS AND DIRECTORS 10. TIFLE MAME BOOTY, BEVERLY W STREET ADDRESS 2324 BRADFORD ST CATY-67-27 SARASOTA, FL 34231 TITLE NAME U00000555977 05/16/06-80054-021 150.00 STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-51-70 Ωπ.€ STREET ADDRESS CATY-ST-ZIP NAME STREET ADDRESS DITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; 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 in Block 10 or Block 11 if

BEVERIUM

4-27-2006 941-349-6008

(Theirna Phone #

changed, or on an attachment-with an address, with all other like empowered.

MONATURE AND TYPED DRPRINTED NAME OF BIGHUNG OFFICER OR DIRECTOR

SIGNATURE

FILED