

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000105485

1. Entity Name

K. HANNAH CORP.



FILED Feb 27, 2006 08:00 AN Secretary of State

Principal Place of Business

2104 SANTA BARBARA BLVD CAPE CORAL, FL 33991 Mailing Address

2104 SANTA BARBARA BLVD CAPE CORAL, FL 33991



DO NOT WRITE IN THIS SPACE

02012006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

65-0993807

5. Certificate of Status Desired

Not Applicable
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HANNAH, KERRY 2104 SANTA BARBARA BLVD. CAPE CORAL, FL 33991

DO NOT WRITE IN THIS SPACE

8. 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 familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANNAH, KARRY 5211 POCATELLA COURT CAPE CORAL, FL 33904			,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					######################################
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					·
12. Thereby certify that the Information supplied with this filling 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 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 in Block 10 or Block 11 if chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-06 239.574-195

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Daytime Phone #