

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853202

Entity Name: HAJOCA CORPORATION**Current Principal Place of Business:**127 COULTER AVE
ARDMORE, PA 19003**Current Mailing Address:**127 COULTER AVE
ARDMORE, PA 19003 US**FEI Number:** 23-2203401**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	COLBURN, KEITH W
Address	555 SKOKIE BLVD., SUITE 555
City-State-Zip:	NORTHBROOK IL

Title	VP
Name	PAPPO, CHRISTOPHER
Address	127 COULTER AVE
City-State-Zip:	ARDMORE PA 19003

Title	C
Name	KLAU, RICHARD
Address	127 COULTER AVE.
City-State-Zip:	ARDMORE PA 19003

Title	P
Name	FANTHAM, RICK
Address	1108 DUNDAS ST. E
City-State-Zip:	LONDON ON N5W 3-A7

Title	A S
Name	MERTZ, WILLIAM
Address	127 COULTER AVENUE
City-State-Zip:	ARDMORE PA 19003

Title	AS
Name	LEMOINE, SHANNON
Address	6232 SEIGEN LANE
City-State-Zip:	BATON ROUGE LA 70809

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: PAPPO , CHRISTOPHER

VP

03/20/2013

Electronic Signature of Signing Officer/Director Detail_____
Date