

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Feb 02, 2004 08:00 AM

Secretary of State

DOCUMENT # 268201 1. Entity Name H & H ENGINEERING, INC.	
--	---

Principal Place of Business 5760 SW 8TH ST FT LAUDERDALE, FL 33317-4320	Mailing Address 5760 SW 8TH ST FT LAUDERDALE, FL 33317-4320
---	---

DO NOT WRITE IN THIS SPACE



01272004 000000 000000000000

4. FEI Number 59-1006285	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 00000000 0000000000	

5. Name and Address of Current Registered Agent HYNES, ANTHONY G 5760 SW 8TH STREET PLANTATION, FL 33317

**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 reissuing)	DATE _____
--	---	------------

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 000000 0000000000
---	---

10. OFFICERS AND DIRECTORS	
TITLE STD NAME HYNES, MARSHA A STREET ADDRESS 5760 SW 8TH ST CITY-STATE-ZIP PLANTATION, FL	DO NOT WRITE IN THIS SPACE
TITLE PD NAME HYNES, ANTHONY G STREET ADDRESS 5760 SW 8TH ST CITY-STATE-ZIP PLANTATION, FL	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Marsha A. Hynes</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	January 27, 2004 (954) 581-7070 Date Daytime Phone #
--	--