2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # H83455

1. Entity Name HPBM, INC.



FILED
May 01, 2006 08:00 AN
Secretary of State

Principal Place of Business

450 LAS OLAS BLVD STE 1500 FT. LAUDERDALE, FL 33301 Mailing Address

JOHN H MUEHLSTEIN 161 N CLARK SUITE 3100 CHICAGO, IL 60601



04252006

No Cha-P

CR2E034 (11/05)

4. FEI Number 36-3393673

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST THIRD AVENUE, 28TH FLOOR MIAMI, FL 33131

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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 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 U00000546798 05/11/06-80130-021 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MUEHLSTEIN, JOHN H. MAME 161 N. CLARK ST., STE. 3100 STREET ADDRESS CITY-ST-ZIP CHICAGO, IL REF PEDERSEN, PEER NAME 161 NORTH CLARK ST., STE. 3100 STREET ADDRESS CITY-ST-ZIP CHICAGO, IL D BUNTROCK, DEAN NAME ONE TOWER LANE STE 2242 STREET ADDRESS DO NOT WRITE OAK BROOK, IL 601814636 CRY-ST-7IP IN THIS SPACE TITLE HUIZENGA, H. WAYNE JR. NAME STREET ADDRESS 450 E LAS OLAS BLVD., STE. 1500 CITY-ST-ZIP FORT LAUDERDALE, FL 33301 TITLE HANDLEY, RICHARD L NAME STREET ADDRESS 450 E. LAS OLAS BLVD., #1500 CITY-ST-ZIP FT. LAUDERDALE, FL 33301 TITS F BRANDEN, CRIS NAME

12. I hereby 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 frue 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 of trustee empowered of 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 a other like empowered.

SIGNATURE:

450 E. LAS OLAS BLVD., #1500 FT. LAUDERDALE, FL 33301

STREET ADDRESS

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #