


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000030549**

1. Entity Name:  
**A & H INVESTMENT GROUP, LLC**



Principal Place of Business: **920 GEORGE HECKER DR. SOUTH DAYTONA, FL 32119**

Mailing Address: **920 GEORGE HECKER DR. SOUTH DAYTONA, FL 32119**

**DO NOT WRITE IN THIS SPACE**



04272004 No Chg-LLC CR2E083 (10/03)

4. FEI Number: **43-1980839**

Applied For:  Not Applied:

5. Certificate of Status Desired:  **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUMBERT, WILLIAM**  
**920 GEORGE HECKER DR**  
**SOUTH DAYTONA, FL 32119**

**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: \_\_\_\_\_

**Filing Fee is \$50.00 Due by May 1, 2004**

000000147871  
 05/03/04-80124-021 50.00

9. MANAGING MEMBERS/MANAGERS

|                |                         |
|----------------|-------------------------|
| TITLE          | V                       |
| NAME           | ALLEN, FREDERICK        |
| STREET ADDRESS | 920 GEORGE HECKER DR    |
| CITY ST ZIP    | SOUTH DAYTONA, FL 32119 |
| TITLE          | P                       |
| NAME           | HUMBERT, WILLIAM        |
| STREET ADDRESS | 920 GEORGE HECKER DR    |
| CITY ST ZIP    | SOUTH DAYTONA, FL 32119 |
| TITLE          |                         |
| NAME           |                         |
| STREET ADDRESS |                         |
| CITY ST ZIP    |                         |
| TITLE          |                         |
| NAME           |                         |
| STREET ADDRESS |                         |
| CITY ST ZIP    |                         |
| TITLE          |                         |
| NAME           |                         |
| STREET ADDRESS |                         |
| CITY ST ZIP    |                         |

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** *Frederick Allen* **4/28/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE