

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90051 001 *1,861.25

DOCUMENT # M26255

1. Entity Name
HAH ENTERPRISES, INC.



Principal Place of Business
401 N.W. 38TH COURT, (ZIP 33126)
P. O. BOX 350940
MIAMI, FL 33135

Mailing Address
401 N.W. 38TH COURT, (ZIP 33126)
P. O. BOX 350940
MIAMI, FL 33135

66404078



01192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2637223

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

HAVENICK, FRED
401 N.W. 38TH COURT
MIAMI, FL 33126

**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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HECHT, FLORENCE 401 NW 38TH CT. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMDUR, ISABELLE 401 NW 38TH CT. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAVENICK, BARBARA 401 NW 38TH CT. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPE HAVENICK, FRED 401 NW 38TH CT. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/04

Date

305-649-3900

Daytime Phone #

Fred Havenick