

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2004 8:00 am
Secretary of State

01-28-2004 90001 049 ***150.00



DOCUMENT # 469575

1. Entity Name

H & H INDUSTRIES LTD., INC.

Principal Place of Business

4200 N OCEAN BLVD
 SUITE 804 W
 SINGER ISLAND FL 33404
 US

Mailing Address

P O BOX 19186
 WEST PALM BEACH FL 33416-9186
 US

2. Principal Place of Business

115 CLAREMONT LANE

Suite, Apt. #, etc.

Singer Island FL

City & State

33404 US

3. Mailing Address

Suite, Apt. #, etc.

City & State

4. FEI Number

59-1579402

Applied For

Not Applicable



MOORE

CR2E034 (11/03)

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HIND, JAMES W
 4200 N OCEAN BLVD # 804 W
 SINGER ISLAND FL 33404

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

115 CLAREMONT LANE #1

City

Singer Island

FL

Zip Code

33404

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|---|
| TITLE | PT <input type="checkbox"/> Delete |
| NAME | HIND, JAMES W |
| STREET ADDRESS | 4200 N. OCEAN BLVD. # 804 W 115 CLAREMONT LN #1 |
| CITY-ST-ZIP | SINGER ISLAND FL 33404 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|----------------|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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

James W. Hind

Date

1/21/04

Daytime Phone #

561-346-9810