

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000785

Entity Name: HHA SERVICES, INC.

FILED  
Feb 28, 2008  
Secretary of State

## Current Principal Place of Business:

22622 HARPER AVENUE  
ST. CLAIR SHORES, MI 48080

## New Principal Place of Business:

## Current Mailing Address:

22622 HARPER AVENUE  
ST. CLAIR SHORES, MI 48080

## New Mailing Address:

FEI Number: 38-2053907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FAYAD, PAUL  
Address: 22622 HARPER AVENUE  
City-St-Zip: ST. CLAIR SHORES, MI 48080

Title: VCD ( ) Delete  
Name: BOWEN, MILDRED  
Address: 22622 HARPER AVENUE  
City-St-Zip: ST. CLAIR SHORES, MI 48080

Title: STD ( ) Delete  
Name: BOWEN, DANIEL W III  
Address: 22622 HARPER AVENUE  
City-St-Zip: ST. CLAIR SHORES, MI 48080

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MILDRED H. BOWEN

VCD

02/28/2008

Electronic Signature of Signing Officer or Director

Date