

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2007 8:00 am
Secretary of State

08-16-2007 90015 041 ***150.00

DOCUMENT # F97000006799

1. Entity Name
F & H SUPPLY CO., INC.



Principal Place of Business
**40-14 24TH ST.
 LONG ISLAND CITY, NY 11101**

Mailing Address
**40-14 24TH ST.
 LONG ISLAND CITY, NY 11101**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

08062007 Chg-P CR2E034 (12/06)

4. FEI Number
11-2124024

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HABER, HENRY
 19667 TURNBURY WAY
 N. MIAMI BEACH, FL 33180**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

40129300



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 \$550.00
 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

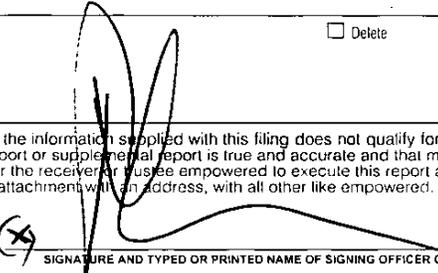
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HABER, HENRY 19667 TURNBURY WAY N. MIAMI BEACH, FL 33180	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HABER, FRED 3515 HENRY HUDSON PKWY. BRONX, NY 10463	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 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

Date: **8/8/07** Daytime Phone #: **718-392-7788**

ATTACHMENT 40129360

F & H INC.

#F97000006799

AMERICA'S LEADING CONTRACT STATIONER

40-14 24TH STREET
LONG ISLAND CITY, NEW YORK 11101

(718) 392-7788

FAX (718) 937-5207

August 8, 2007

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500
Gentlemen,

This company did not receive any postcard or any form for the 2007 Profit Corporation Annual Report. Kindly accept our payment of \$150.00 and waive the late payment of \$400.00.

Respectfully submitted,

(x)

Fred Haber-Sec'y-Treas.