


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 8:00 am**  
**Secretary of State**

04-13-2007 90162 028 \*\*\*150.00

**DOCUMENT # K31951**  
 1. Entity Name  
 S & H OF WEST PALM BEACH, INC.



Principal Place of Business: 1737 E. COMMERCIAL BLVD, SHOPPE OF 18TH ST AT COMMERCIAL, FT LAUDERDALE, FL 33334  
 Mailing Address: 1737 E. COMMERCIAL BLVD, FT LAUDERDALE, FL 33334

40059296



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

03272007 Chg-P CR2E034 (12/06)

4. FEI Number: 65-0071108  
 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent  
 BHATTI, HAMID B  
 1737 E COMMERCIAL BLVD  
 FT LAUDERDALE, FL 33334

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

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: *Hamid Bhatti* DATE: 4-10-2007  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BHATTI, HAMID B.	
STREET ADDRESS	1737 E COMMERCIAL BLVD	
CITY-ST-ZIP	FT LAUDERDALE, FL 33334	
TITLE	D	<input type="checkbox"/> Delete
NAME	BHATTI, SABIRA S	
STREET ADDRESS	1737 E COMMERCIAL BLVD	
CITY-ST-ZIP	FT LAUDERDALE, FL 33334	
TITLE	D	<input type="checkbox"/> Delete
NAME	AHMED, FAROOQ	
STREET ADDRESS	4562 HUNTING TR	
CITY-ST-ZIP	LAKEWORTH, FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	AHMED, SARAH	
STREET ADDRESS	4562 HUNTING TR	
CITY-ST-ZIP	LAKEWORTH, FL 33467	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 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: *Hamid Bhatti* DATE: 4-10-07 954-772-8300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #