2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L0000003337

1. Entity Name

STREET ADDRESS CHTY-ST-ZIP

SIGNATURE:

H & H HOLDINGS, LLC

Principal Place of Business



Mailing Address

444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118

444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118

FILED Feb 16, 2004 08:00 AM

- Secretary of State



01302004 No Chg-LLC

CR2E083 (10/03)

386-255-2572

Daylime Phone #

4. FEI Number 59-3715742 Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired . Fee Required

6. Name and Address of Current Registered Agent

BHOOLA, MANOJ J 444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signatura, typed or adnited name of registered agent and talle if againcable.	(NOTE, Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			U00000053978 02/16/04-80153-014 50.00
9.	MANAGING MEMBERS/MANAGERS	The state of the s	**************************************
BITLE NAME SIBEET ADDRESS CUTY-SI-ZIP	MGRM BHOOLA, MOHAN J 444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BHOOLA, MANOJ A 444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BHOOLA, SNEHALKUMAR 444 SEABREEZE BLVD., SUITE 200 DAYTONA BEACH, FL 32118	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ABORESS CITY - ST - ZIP			
HTLE NAME			

11. I hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

MAMOS Offered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE