. 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 15, 2004 08:00 AM Secretary of State

DOCUMENT # L02000022100 1. Entity Name HINK HOLDINGS, LLC			Secretary of State
Principal Place of Business 2900 NORTHEAST 23RD STREET POMPANO BEACH, FL 33062 Mailing Address 2900 NORTHEAST 23RD STREET POMPANO BEACH, FL 33062			
			
DO NOT WRITE IN THIS SPACE			01062004No Chg-LLC CR2E083 (10/03)
			4. FEI Number Applied For 52-2374678 Not Applicable
			5. Certificate of Status Desired Sequired Fee Required
Name and Address of Current Registered Agent			
SINGER, BERNARD A 3107 STIRLING ROAD			DO NOT WRITE
SUITE 105 FT. LAUDERDALE, FL 33312			IN THIS SPACE
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			
Filing Fee is \$50.00 Due by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HINK, ROBERT 2900 NE 23 STREET POMPANO BEACH, FL 33062		U00000005425 01/16/04-80002-017 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST YUNICK, MARGIE 2900 NE 23 STREET POMPANO BEACH, FL 33062		U1/15/04-80002-01/ 50.00 I
TITLE NAME STREET ADDRESS CITY ST 2P			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-2IP			
NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby o	certify that the information supplied with this filing does not qualify for the exer on this report is true and accurate and that my signature shall have the same	nption stated in t legal effect as it	Section 119.07(3)(i), Florida Statutes. I further certify that the information if made under oath: that I am a managing member or manager of the

imited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

-11-04 954-78

Daytime Phone #