2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022545

Entity Name: H&R INVESTMENTS, LLC

FILED Aug 02, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

407 CENTER POINTE CIRCLE, SUITE 1637 587 E STATE RD ALTAMONTE SPRINGS, FL 32701

434

LONG WOOD, FL 32750 US

Current Mailing Address: New Mailing Address:

407 CENTER POINTE CIRCLE, SUITE 1637 9888, BISSONNET DR. ALTAMONTE SPRINGS, FL 32701

300

HOUSTON, TX 77036 US

FEI Number: 20-0850148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PHILIP K. CALANDRINO, P.A. RAJAN, ARIF 29 EAST PINE STREET 587 E STATE RD.

ORLANDO, FL 32801 434 LONG WOOD, FL 32750 US

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: ARIF RAJAN 08/02/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

() Delete MGRM () Change (X) Addition RAJAN, ARIF Name: Name: Address: Address: 587 E STATE RD. #434 City-St-Zip: City-St-Zip: LONGWOOD, FL 32750 US

Title: Title: MGRM () Change (X) Addition () Delete

Name: Name: HEMANI, ALTAF Address: Address: 587 E STATE RD. #434 City-St-Zip: City-St-Zip: LONGWOOD, FL 32750 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ARIF RAJAN **MGRM** 08/02/2004