


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000055649	
1. Entity Name H & S MANAGEMENT, LLC	

Principal Place of Business 4811 NW 79 AVE SUITE # 5 MIAMI, FL 33166	Mailing Address 4811 NW 79 AVE SUITE # 5 MIAMI, FL 33166
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DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0661620	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent SERRANO, CESAR E 4811 NW 79 AVE SUITE # 5 MIAMI, FL 33166	DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SERRANO, CESAR E 4811 NW 79 AVE SUITE # 5 MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOVER, JONH JR 2423 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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02/21/07-80016-004 50.00

11. 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 is true and accurate and that my 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: *Cesar E Serrano* 1/11/07 305-592-6559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #