2007 LIMITED LIABILITY COMPANY

SIGNATURE AND TYPES OR SEINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED **ANNUAL REPORT** Mar 26, 2007 08:00 AM DOCUMENT # L04000076101 **Secretary of State** H & S GROUP, L.L.C. Principal Place of Business Mailing Address 13322 BYRD DRIVE 13322 BYRD DRIVE ODESSA, FL 33556 ODESSA, FL 33556 US 03232007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1782307 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHNEIDER, NANCY G DO NOT WRITE 13322 BYRD DRIVE ODESSA, FL 33556 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, 2007 9. MANAGING MEMBERS/MANAGERS TITLE MGRM SCHNEIDER, MARK W NAME STREET ADDRESS 13322 BYRD DRIVE CITY-ST-ZIP ODESSA, FL 33556 U00000679042 04/03/07-80022-011 55.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing poss 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 agreeture 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.