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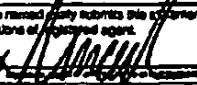
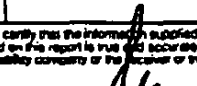
**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

05 MAY -9 PM 3:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

LR
05/09/05

DOCUMENT # L94000000597			
1. Entity Name H & V INCOME, L.C.			
Principal Place of Business 12108 N. 56TH STREET SUITE 3 & 5 TAMPA, FL 33617		Mailing Address 12108 N. 56TH STREET SUITE 3 & 5 TAMPA, FL 33617	
3. Principal Place of Business 2901 W. Busch Blvd 901 Tampa, Florida 33618		3. Mailing Address 2901 W. Busch Blvd 901 Tampa, Florida 33618	
4. Federal Tax ID 59-3277918		4. Certificate of Status Desired ☒ 33.00 Additional Fee Required	
5. Name and Address of Current Registered Agent BEKIEMPS, VINCENT 12108 N. 56TH STREET TAMPA, FL 33617		5. Name and Address of New Registered Agent BEKIEMPS, VINCENT 2901 W. Busch Blvd #901 Tampa, FL 33618	
6. 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: 		SIGNATURE: VINCENT BEKIEMPS ID: 10-20-05	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
MANAGING MEMBERS / MANAGERS			
1A. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617		1B. NAME mgr Bekiempis, Vincent STREET ADDRESS 2901 W. Busch Blvd #901 Tampa, Florida 33618	
2A. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617		2B. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617	
3A. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617		3B. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617	
4A. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617		4B. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617	
5A. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617		5B. NAME BEKIEMPS, VINCENT STREET ADDRESS 12108 N. 56TH STREET TAMPA, FL 33617	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b), 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 and consent to research this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		SIGNATURE: VINCENT BEKIEMPS ID: 10-20-05	
STATE OF FLORIDA DEPARTMENT OF STATE			

* Vincent Bekiempis
is the Manager

mgr
Bekiempis, Vincent
2901 W. Busch Blvd
#901
Tampa FL 33618