FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 22, 2007 8:00 am
Secretary of State
06-22-2007 90002 003 ***150.00

DOCUMENT # P00000092248

1. Entity Name

HOLLYWOOD HILLS INVESTMENTS CORP

DO NOT WRITE IN THIS SPACE

40121496

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2844 STIRLING ROAD	2844 STIRLING ROAD
Suite/Apt. #, etc. K	Suite/Apt. #, etc. K
City & State HOLLYWOOD FLORIDA	City & State HOLLYWOOD FLORIDA
Zip 33020 Country BROWARD	Zip 33020 Country BROWARD

4. FEI Number 65-1043663 ☐ Applied For ☐ No. Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: RAMI ZVIDA

Street Address (P.O. Box Number is Not Acceptable): 3520 N. 54TH AVENUE

City: HOLLYWOOD FL Zip Code: 33021

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: RAMI ZVIDA / VICE PRESIDENT — 6/8/07
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required on reinstatement — DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	TITLE	
NAME	AMAR SALMAN	NAME	
STREET ADDRESS	5329 S. 38TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33021	CITY-ST-ZIP	
TITLE	VICE PRESIDENT	TITLE	
NAME	RAMI ZVIDA	NAME	
STREET ADDRESS	3520 N. 54TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FLORIDA 33021	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	**DO NOT WRITE**
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMI ZVIDA / VICE PRESIDENT — 6/8/07 (954) 964-8898
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number