# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 30, 2006**
**Secretary of State**

DOCUMENT# P03000131543

**Entity Name:** HM-NM, INC.

**Current Principal Place of Business:**

8277 WESTERN WAY CIRCLE
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

8277 WESTERN WAY CIRCLE
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number: 16-1688300** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MORGAN, ROBERT M
10110 SAN JOSE BLVD.
JACKSONVILLE, FL 32257 US

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

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: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: MOURIRAHIMI, HAMIDREZA
Address: 8304 RIDING CLUB RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete
Name: MOURIRAHIMI, NINA
Address: 8304 RIDING CLUB RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete
Name: MOURIRAHIMI, ALIREZA
Address: 8304 RIDING CLUB RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete
Name: MOUSAVI, PARVIN
Address: 8304 RIDING CLUB RD.
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALIREZA MOURIRAHIMI V.P 05/30/2006

Electronic Signature of Signing Officer or Director — Date