

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 23, 2005 8:00 am
Secretary of State

01-13-2005 90002 022 ***150.00

DOCUMENT # P04000149414 1. Entity Name H & H HEAVENLY HANDS, INC.					
Principal Place of Business 11781 NW 26TH STREET PLANTATION, FL 33323			Mailing Address 11781 NW 26TH STREET PLANTATION, FL 33323		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
01042005 Chg-P CR2E034 (10/03)				66002473 	
4. FEI Number 26-0099783				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent TURNER, OTEL 5787 W SUNRISE BLVD PLANTATION, FL 33313	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVST HENDERSON, MICHAEL 11781 NW 26TH STREET PLANTATION, FL 33323 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Michael Henderson</i>			Date: 1/10/05		