

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000091934

1. Entity Name  
H & B INTERNATIONAL INC.



FILED

07 MAY -4 PM 4: 04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
1638 NORTH PLAZA DR  
TALLAHASSEE, FL 32312

Mailing Address  
1638 NORTH PLAZA DR  
TALLAHASSEE, FL 32312

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05022007

Chg-P

CR2E034 (12/06)

87

4. FEI Number

611504639

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HENRY, MARIA  
1638 NORTH PLAZA DR  
TALLAHASSEE, FL 32312

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  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE DC ☐ Delete  
NAME HENRY, MARIA  
STREET ADDRESS 5408 TOURAIN DRIVE  
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE D ☐ Delete  
NAME HENRY, LIONEL  
STREET ADDRESS 5408 TOURAIN DRIVE  
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE DCEO ☐ Delete  
NAME HENRY, KHARY  
STREET ADDRESS 5408 TOURAIN DRIVE  
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE DCEO ☐ Delete  
NAME HENRY, KASIMU  
STREET ADDRESS 5408 TOURAIN DRIVE  
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE DP ☐ Delete  
NAME HENRY, KEBREAB  
STREET ADDRESS 5408 TOURAIN DRIVE  
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE DCFO ☐ Delete  
NAME ADAM, MATTHEW  
STREET ADDRESS PO BOX 1280  
CITY-ST-ZIP GEORGETOWN, GRAND CAYMAN ISL,

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME 200103092582  
STREET ADDRESS 05/23/07--01008--001 \*\*150.00  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

*Kevin Henry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-3-07

Date

850-445-7955

Daytime Phone #