

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P92000011929

1. Entity Name
H & H ENTERTAINMENT INC.



Principal Place of Business
**5000 N OCEAN BLVD.
Q #208
BRINY BREEZES, FL 33435 US**

Mailing Address
**5000 N OCEAN BLVD.
Q #208
BRINY BREEZES, FL 33435 US**



01192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0375176	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DOMBROSKI, BRENDA W
1447 W JENNINGS ST.
LAKE WORTH, FL 33462**

**DO NOT WRITE
IN THIS SPACE**

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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DOMBROSKI, MARGARET
STREET ADDRESS	5000 N OCEAN BLVD Q208
CITY-ST-ZIP	BOYNTON BEACH, FL 33435

TITLE	D
NAME	DOMBROSKI, HENRY F
STREET ADDRESS	5000 N OCEAN BLVD Q208
CITY-ST-ZIP	BRINY BREEZES, FL 33435

TITLE	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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02/01/07-80019-006 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Margaret Dombroski
Henry F Dombroski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07

501-278-4311

Daytime Phone #