

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000058974 1. Entity Name PHA - INVESTMENT AND MANAGEMENT, INC.	
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Principal Place of Business 1124 SOUTH POWERLINE RD., SUITE 1124 POMPAHO BEACH, FL 33069-4340 US	Mailing Address P.O. BOX 11119 FORT LAUDERDALE, FL 33339-1119
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01122006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0442108	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HEYDEN, PAUL L
4750 NE 29TH AVENUE
FT. LAUDERDALE, FL 33308

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IN THIS SPACE**

7. 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, 2006 Fee will be \$550.00	8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added To Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEYDEN, PAUL L 4750 NE 29TH AVENUE FT. LAUDERDALE, FL 33308
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04/20/06-80032-009 150.00

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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: Paul Heyden - PAUL L. HEYDEN APRIL 3, 2006 (954) 971-5455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #