FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90040 020 ***150.00

DOCUMENT # P9400056483

1. Corporation Name

H & F SERVICES, INC.

1999

Principal Place of Business	Mailing Address				
16160 SW 250TH STREET MIAMI FL 33031	16160 SW 250TH STREET MIAMI FL 33031				
•					
2. Principal Place of Business	2a. Mailing Address				
	2a. Mailing Address				
2. Principal Place of Business	— ·				
Principal Place of Business 21	26				

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

 \Box

Applied For

Fee Required

Not Applicable \$8.75 Additional

07/29/1994 4. FEI Number

NOT APPLICABLE

5. Certifcate of Status Desired

City & Stat	e	28				6. Election Campaign Finar Trust Fund Contribution	icing 🗀	Added t	•	
Zip	Country	Zip	Zip Country			This corporation owes the Personal Property Tax.	oration owes the current year Intangible Property Tax.			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CON		<u>. </u>		81	Name					
GONZALEZ, FELIPE 16160 SW 250TH STREET				82	32 Street Address (P.O. Box Number is Not Acceptable)					
MIAI	VII FL 33031			83	····		****	-		
\ .				84	City		Fl	85 Zip (Code	
office or r	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obligat	of Florida. Such chan	ge was authorize	ed by t	he corporatio	ration submits this statement f s's board of directors. I hereby	or the purpose o accept the appo	f changing its intment as re	registered gistered	
IGNATURE	<u> </u>						2.75			
	Signature, typed or printed name of registered agen		,	_ <u>~</u> _	signature required		DATE	ND DISECTO	DC IN 12	
2.		D DIRECTORS	13			ADDITIONS/CHANGES T	O OFFICERS A			
TLE	PD	□D	ELETE 1.1	1.1 TITLE				Change	☐ Addition	
AME	GONZALEZ, FELIPE 1.2		NAME	AME						
TREET ADDRESS	16160 SW 250TH STREET		1.3	STREET.	ADDRESS					
TD/ OT 7ID	MIAMI FL 33031									
TY-ST-ZIP	WIAWI FL 33031			CITY-ST				Change		

DELETE" TITLE GONZALEZ, HILDA 2.2 NAME NAME 16160 SW 250TH STREET 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33031** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

REQUIRED TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR