2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 27, 2007
Secretary of State

DOCUMENT# P94000061131

Entity Name: H & H ASSOCIATES INC.

Current Principal Place of Business:

18880 SW 41ST ST
MIRAMAR, FL 33029

New Principal Place of Business:

Current Mailing Address:

18880 SW 41ST ST
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 65-0514203 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HICKS, JACQUELINE
20911 JOHNSON ST., STE 131
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: HICKS, ERROL
Address: 18880 SW 41ST ST
City-St-Zip: MIRAMAR, FL 33029

Title: P ( ) Delete
Name: HICKS, JACQUELINE
Address: 18880 SW 41ST ST
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Delete
Name: JACKSON, CLARENCE
Address: 18880 SW 41ST ST
City-St-Zip: MIRAMAR, FL 33029

Title: T (X) Delete
Name: HICKS, JAMAL D
Address: 18880 SW 41ST ST
City-St-Zip: MIRAMAR, FL 33029

Title: O (X) Delete
Name: HICKS, PHILICIA J
Address: 18880 SW 41ST STREET
City-St-Zip: MIRAMAR, FL 33029

Title: O (X) Delete
Name: HICKS, HASHIM J
Address: 18880 SW 41ST STREET
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VST (X) Change ( ) Addition
Name: HICKS, ERROL
Address: 18880 SW 41ST ST
City-St-Zip: MIRAMAR, FL 33029

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELINE HICKS P 05/27/2007

Electronic Signature of Signing Officer or Director — Date