2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 02, 2004 08:00 AM Secretary of State

DOCUMENT # P95000080270 1. Entity Name HELP MORTGAGE & INVESTMENTS, INC.	
Principal Place of Business 1850 N UNIVERSITY DR PLANTATION, FL 33322 US Mailing Address 1850 N UNIVERSITY DR PLANTATION, FL 33322	US
	01252004 No Chg-P CR2E034 (10/03) 4. FEl Number Applied For
	5. Certificate of Status Desired \$8.75 Additional Fee Required
Name and Address of Current Registered Agent	
HYMOWITZ, MARTIN 1850 N UNIVERSITY DR PLANTATION, FL 33322	
The above named entity submits this statement for the purpose of changing its registered agent.	pistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Reg	gistered Agent signature required when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign F	Financing\$5.00 May 8e
10. OFFICERS AND DIRECTORS	100000025784
THE ST MAME HYMOWITZ, MARTIN SIREELADDRESS 2713 OAKBROOK DR CHY-SI-7P FT LAUDERDALE, FL	100000025784 02/02/04-80119-017 158.75
DITLE MAME STREET ADDRESS GITY-\$1-7/P	
TOTAL NAME STREET ADDRESS CITY-ST-ZIP	
NIJLE KAME STREET ADDRESS CITY-SI-2IP	
HITLE NAME STREET AUDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CR Y-ST- ZIP	
12. Thereby certify that the information supplied with this filing does not qualify for the indicated on this report or suppliemental report is true and accurate and that my significant of the corporation or the receiver or trustee empowered to execute this report as rechanged, or on an attachment with an accuracy with all other like expowered	e exemption stated in Section 119.07(3)(i), Flunda Statutes. I further certify that the information signature shall have the same legal effect as if made under path, that I am an officer or director required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE: SIGNATURE AND TYPED ORPHINTED NAMED PSIGNANG OFFICE ADDRESS	Discardir Date Operating Phone #