2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # P9600000548 HNVESTMENTS, INC.	38				<i>y</i> =
Principal Placi 865 SE 21ST DEERFIELD E						
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				04222004 4. FEI Numb 65-063	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
530 SOUT DEERFIEL	ROBERT G H FEDERAL HWY LD BEACH, FL 33441	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 fund a name of registered agent and filter applicable. (NOTE Registered Agent signature required when reinstained). PILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Added to Fees.						
	ay 1, 2004 Fee will be \$550.00 OFFICERS AND DIR	Trust Fund Contribution	L AC	ided to Fees		
10. HILE NAME SIREET ADDRESS DITY ST-2IP HILE NAME STREET ADDRESS	PSD ARGYROPOULOS, DORA 865 S.E. 21ST AVENUE DEERFIELD BEACH, FL 33441				U00000 04/29/04-	1138564 -80085-016 150.00
CITY ST-ZIP TIFLE NAME STREET AUGRESS CITY-ST-ZIP					NOT W	
NAME STREET ADDRESS CITY ST ZIP				IN	THIS SI	PACE
CITA 21 FIB VAWE VAME						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. 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 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 altrachment with an address, with all other like empowered.						