2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000037652

HECHT, MARINA

MOELESTRASS 4

FREISING, GE 85354

Name:

Address:

City-St-Zip:

Entity Name: H.E.H. FLORIDA CONSULTING, INC.

FILED Apr 30, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:	
6371-4 PR	RESIDENTIAL (ERS, FL 3391	COURT		
Current Mailing Address:			New Mailing Address:	
	RESIDENTIAL (ERS, FL 3391)			
FEI Number	: 65-0924926	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
6371-4 PR FORT MY The above	ANDREW G C RESIDENTIAL C ERS, FL 3391 e named entity : e of Florida.	COURT 9 US	purpose of changing its registere	d office or registered agent, or both,
SIGNATURE: Electronic Signature of Registered Age			ent	 Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () HECHT, HANS MOEHLESTRA FREISING, GE	SSE 4	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () Delete HECHT, EMMA MOELESTRASSE 4 FREISING, GE 85354		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () HECHT, HANS MOEHLESTRA FREISING, GE	SS 4	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	D ()) Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANDREW G. JESSEN RA 04/30/2009