

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90290 004 ***158.75

DOCUMENT # P96000061872 1. Entity Name L.H.F., INC.																																																																																																																																							
Principal Place of Business 3250 MARY ST SUITE 500 COCONUT GROVE, FL 33133 US		Mailing Address 3250 MARY ST SUITE 500 COCONUT GROVE, FL 33133 US																																																																																																																																					
2. Principal Place of Business 4101 RAVENSWOOD RD Suite, Apt. #, etc. SUITE 130 City & State DANIA FL Zip 33312 Country BROWARD		3. Mailing Address 4101 RAVENSWOOD RD Suite, Apt. #, etc. SUITE 130 City & State DANIA FL Zip 33312 Country BROWARD																																																																																																																																					
4. FEI Number 65-0712579		Applied For <input type="checkbox"/> Not Applicable																																																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																																																					
6. Name and Address of Current Registered Agent RAFOFSKY, HARVEY 4101 RAVENSWOOD RD STE 130 DANIA, FL 33312		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																					
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE																																																																																																																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																					
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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 attachment with an address, with all other like empowered.																																																																																																																																							
SIGNATURE: <u><i>Harvey P. Rafofsky</i></u>		Date: <u>3/1/05</u> Daytime Phone #: <u>954-791-1101</u>																																																																																																																																					
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