

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90230 004 ***150.00

DOCUMENT # P97000075478

1. Entity Name
H FAMILY INVESTMENTS, INC.



Principal Place of Business
**450 E LAS OLAS BLVD SUITE 1200
FT LAUDERDALE, FL 33301**

Mailing Address
**450 E LAS OLAS BLVD SUITE 1200
FT LAUDERDALE, FL 33301**

40084523



2. Principal Place of Business - No P.O. Box #
450 E Las Olas Blvd
Suite, Apt. #, etc.
Suite 1500

3. Mailing Address
450 E Las Olas Blvd
Suite, Apt. #, etc.
Suite 1500

04172007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
65-0782240

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**AMERICAN INFORMATION SERVICES, INC.
ONE SE 3RD AVENUE 28TH FLOOR
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME HUIZENG, JR., H. WAYNE
STREET ADDRESS 450 E LAS OLAS BLVD SUITE 1200
CITY-ST-ZIP FT LAUDERDALE, FL 33301

TITLE S ☐ Delete
NAME HANDLEY, RICHARD L
STREET ADDRESS 450 E LAS OLAS BLVD SUITE 1200
CITY-ST-ZIP FT LAUDERDALE, FL 33301

TITLE VT ☐ Delete
NAME BRANDEN, CRIS V
STREET ADDRESS 450 E LAS OLAS BLVD SUITE 1200
CITY-ST-ZIP FT LAUDERDALE, FL 33301

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Cris V. Branden

4/26/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #