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May 03, 1999 8:00 am  
Secretary of State

05-03-1999 90095 029 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000105446

1. Corporation Name

S & H PRODUCTS & SERVICES INC.

Principal Place of Business

408 N.W. 68TH AVE.  
SUITE 509  
PLANTATION FL 33321  
US

Mailing Address

408 N.W. 68TH AVE.  
SUITE 509  
PLANTATION FL 33321  
US

2. Principal Place of Business

21 7000 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

22 302

City & State

23 FT. LAUDERDALE, FL

Zip

24 33324

Country

25 US

2a. Mailing Address

26 408 N.W. 68TH AVE.

Suite, Apt. #, etc.

27 SUITE 509

City & State

28 PLANTATION, FL

Zip

29 33324

Country

30 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1997

4. FEI Number

65-0803760

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ZAIDI, HUMA A  
408 N.W. 68TH AVE.  
SUITE 509  
PLANTATION FL 33321

10. Name and Address of New Registered Agent

81 Name

SHAWN K.

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

8731 NW 3RD CT

83

84 City

FT. LAUDERDALE FL

85 Zip Code

33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ZAHDA, HUMA A ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
408 N.W. 68TH AVE., 509  
PLANTATION FL 33321

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ZAHDA, HUMA A ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
7000 W OAKLAND PARK BLVD  
FT. LAUDERDALE, FL 33327

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]* ZAHDA HUMA A.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99 (954) 5841718

Date Daytime Phone #

CR2E034 (11/98)