2007 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ANNUAL REPORT

DOCUMENT # P98000005181

H & M INVESTMENTS, INC.



FILED May 03, 2007 08:00 A Secretary of State

Principal Place of Business

2101 SOUTHWEST 7TH AVENUE MIAMI, FL 33129

Mailing Address

2101 SOUTHWEST 7TH AVENUE MIAMI, FL 33129



04282007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0806859 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

2101 SOUTHWEST 7TH AVENUE MIAMI, FL 33129			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for the plans of registered agent Signature, typed or printegating of registered agent and title			egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	g 🗖	\$5.00 May Be Added to Fees	U00000753300 05/24/07-80037-001 150.00
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOYOS, ORLANDO 2101 SOUTHWEST 7TH AVENUE MIAMI, FL 33129 T HOYOS, IVAN 2101 SOUTHWEST 7TH AVENUE MIAMI, FL 33129	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	V MUNIZ, DENNIS 620 SW 23RD RD MIAMI, FL 33129 S HOYOS, ELIODORO O		,		NOT WRITE THIS SPACE
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	2101 S.W. 7 AVE MIAMI, FL 33129		÷		

12. I nereby certify that the information supplied with this filling 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, withyall other like expowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

BUTED NAME OF SIGNING OFFICER OR DIRECTOR