

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # V00431**

1. Entity Name  
**H & E CLOCKS, INC.**



Principal Place of Business

**2355 S RIDGEWOOD AVE  
SO DAYTONA, FL 32119**

Mailing Address

**2355 S RIDGEWOOD AVE  
SO DAYTONA, FL 32119**

**DO NOT WRITE IN THIS SPACE**



03232006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-3101366**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KATZ, MICHAEL  
2355-A S RIDGEWOOD AVENUE  
SOUTH DAYTONA, FL 32119**

**DO NOT WRITE  
IN THIS SPACE**

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 restoring)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	KATZ, RENA
STREET ADDRESS	2355A S RIDGEWOOD AVE
CITY-ST-ZIP	S DAYTONA, FL
TITLE	P
NAME	KATZ, MICHAEL
STREET ADDRESS	2355-A S RIDGEWOOD AVE
CITY-ST-ZIP	SOUTH DAYTONA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000528377  
05/05/06-80035-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

**MICHAEL H. KATZ**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/19/06**  
Date

**386-781-0077**  
Daytime Phone #