\$10.00.

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNUAL REPORT						FIL.ED			
DOCUMENT # V51137 1. Entity Name B & H ENTERPRISES, INC. OF THE PALM BEACHES					06 JUL 21 AH 10: 14 SECRETARISSEE, FLORIDA TALLAHASSEE, FLORIDA				
Principal Place of Business 1660-B CYPRESS DRIVE JUPITER, FL 33489		Mailing Address 1660-B CYPRESS DRIVE JUPITER, FL 33489						T il o e i il e ss i	
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07142006	Chg-P	CR2E034 (11/05)	1	
City & State		City & State			4. FEI Number 65-0343		 	pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate o	f Status Desired	\$8.75 Ac Fee Requir	lditional ed	
1660-B CYPRESS DRIVE JUPITER, FL 33489 City					7. Name and Address of New Registered Agent V. K. Hem & President (P.O. Box Number is Not Acceptable) The State of Code of				
8. The above named entity of this estatement of the state of Florida. I am familiar with, and accept the obligations of personal productions of person									
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND D HEMLAK, DAVID 19199 ROBERT DRIVE JUPITER, FL	DIRECTORS TA Delete	11. TITLE NAME STREET AD CITY-ST-2		00		FICERS AND DIRECTOR Change Change 7022 **70	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMLAK, MARK 18931 SE SUDDARD JUPITER, FL	Delete	TITLE NAME STREET AD CITY-ST-Z	DORESS HER	sident nlak, ma 31 Sudde piter G1	ek ud Dr 33469	Æ ¶ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMLAK, NANCY 11771 SE DOHERTY JUPITER, FL	☐ Delete	TITLE NAME STREET AD CITY-ST-2	1 46 4 7	relation No. 1156 D piter,	ney onerti F1.3346	©Change	Addition	
NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AD CITY-SI-2	1	P(Change	☐ Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AD CITY-ST-2	- 1	S. (K. 10)		Chan	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AD CITY-ST-2	ZIP		0	Change	Addition	
12. Thereby 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 trustep min-average to sective this export 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 a section of the corporation of the receiver or trustep min-average to the section of the corporation or the receiver or trustep min-average to the section of the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep min-average to the corporation or the receiver or trustep.									
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date									