## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000104298

Entity Name: H.P.N. INVESTMENTS, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O ASTOR DEVELOPMENT GROUP

C/O ASTOR DEVELOPMENT GROUP

 2701 SW THIRD AVENUE
 2701 SW THIRD AVENUE

 MIAMI, FL 331292335
 MIAMI, FL 331292335 US

Current Mailing Address: New Mailing Address:

C/O ASTOR DEVELOPMENT GROUP
2701 SW THIRD AVENUE

C/O ASTOR DEVELOPMENT GROUP
2701 SW THIRD AVENUE

FEI Number: 43-1979912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TORRES, HENRY

9405 OLD CUTLER LANE

CORAL GABLES, FL 33156 US

TORRES, PETER A MR.

2701 SW THIRD AVENUE

MIAMI, FL 331292335 US

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.

SIGNATURE: PETER A. TORRES 01/06/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: TORRES, HENRY Name: TORRES, HENRY MR.
Address: 9405 OLD CUTLER LANE Address: 2701 SW THIRD AVENUE

 Address:
 9405 OLD CUTLER LANE
 Address:
 2701 SW THIRD AVENUE

 City-St-Zip:
 CORAL GABLES, FL 33156
 City-St-Zip:
 MIAMI, FL 331292335 US

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: TORRES, PETER MR.

 Name:
 TORRES, PETER MR.

 Address:
 2127 BRICKELL AVE. #3005
 Address:
 2701 SW THIRD AVENUE

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:
 MIAMI, FL 331292335 US

Title: STD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 TORRES, NILDA
 Name:

 Address:
 9405 OLD CUTLER LANE
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33156
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER A. TORRES MR. 01/06/2004