FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 11 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000012806 (1)

HP ONE HOLDINGS CORP.

| Principal Place | e of Business | Mailing Address 6262 BIRD ROAD | | | | |
|--|---|-----------------------------------|------------|------------------|---|-------------------------|
| Buite 8 Miami Fl 331! | 55 | SUITE 31 MIAMI FL 33155-4882 | | | | |
| ÷. | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Re 02/09/1996 | port |
| | Place of Business | 2a. Mailing Address | | | 4. FEI Number Apr | olied For |
| 21 | | 26 | | | 65-0686693 Not | Applicable |
| Sulte, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired S8.75 A | dditional |
| City & Stat | ė | City & State | | | Fee Rec | |
| 23 | | 28 | | | 6. Election Campaign Financing \$5.00 r Trust Fund Contribution Added to | |
| Zip | Country | Zip | Countr | у | This corporation has liability for intangible tax under s. | |
| 24 | 25 | 29 | 30 | | Florida Statutes 🔲 Yes 🗶 No | , , |
| | 9. Name and Address of Curre | ent Registered Agent | | a | 10. Name and Address of New Registered Agent | |
| | ueta, ignacio g | | 8 | Name | | |
| | 5 BIRD ROAD | | 82 | Street A | oddress (P.O. Box Number is Not Acceptable) | |
| MIA | MI FL 33155 | | 8: | | | |
| | | | 0, | 1 | | |
| | | | 84 | City | E1 85 Zip C | ode |
| 11. Pursuant office or r agent. I a SIGNATURE | to the provisions of Sections 607.05 egistered agont, or both, in the Stati im familiar with, and accept the oblig Signature, typed or printed name of registered as | | | | corporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as re- | registered egistered |
| 12. | | VD DIRECTORS | 13, | jeni signature n | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | 2 IN 10 |
| TITLE | D | DELFTE | 1.1 1011.6 | | ☐ Change | Addition |
| NAME | P FE RDMENGES, HENRI | | 1.2 NAME | | | _ |
| STREET ADDRESS | 6262 BIRD ROAD, SUITE 31 | | 1.3 \$1REF | 1 ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33155 | | 1.4 CITY- | S1 - 71P | | |
| TITLE | | DELFTE | 2.1 TITLE | | Change | ☐ Addition |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | | 1 ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 2 4 CITY- | \$1 - ZIP | | T Anne |
| NAME | | ר ווינוני | 3.1 TITLE | | ☐ Change | Addition |
| STREET ADDRESS | | | 3.2 NAME | 1 ADDRESS | > ** | |
| CITY-ST-ZIP | | | 3.4. City | | | |
| TITLE | | DELETE | 4.1 TITLE | 31-21 | Change | Addition |
| NAME | | _ | 4. 2 NAME | | | |
| STREET ADDRESS | | | | 1 ADDRESS | • | |
| CITY-ST-ZIP | | | 4.4 C(TY- | ST-ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | 1 | Change | ☐ Addition |
| NAME | | | 5.2 NAME | | (h 1/1 | |
| STREET ADDRESS | | | 5.3 STREE | T ADDRESS | $\mathcal{U}\mathcal{U}\mathcal{U}$ | ` |
| CITY-ST-ZIP | | | 5.4 CITY- | ST-ZIP | | |
| TITLE | | DELETE | 6.1 TITLE | | ∐ Change | Addition |
| NAME CTOCCT ADDDCCC | , | | 6.2 NAME | | 500002085445 -02/12/9701085012 ***165.00 | |
| STREET ADDRESS | | | 6.3 STREE | 1 ADDRESS | ###100 00 | |

14. I do 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 of an alactionent with an address.