

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90132 036 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J10538

1. Entity Name

H & P Export, Inc.

Principal Place of Business Mailing Address

6117 Spinnaker Loop
 Lady Lake, Florida

A0063215

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

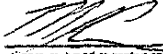
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Lady Lake, Florida Zip 32159 Country
 4. FEI Number 59-2661749 Applied For Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
 Name Max A. Cohen, CPA
 Street Address (P.O. Box Number is Not Acceptable) 7600 Red Road
 Suite 334
 City South Miami FL Zip Code 33143

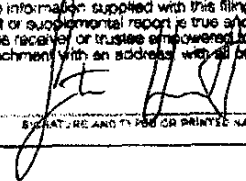
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  Max A. Cohen 4/26/2001
(Signature, hand or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when resigning) DATE

9. This corporation is eligible to satisfy its intangible Tax (filing requirement and elects to do so. (See contents on back) ☒ 10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President ☐ Delete	NAME James Pope	TITLE	NAME ☐ Change ☐ Addition
STREET ADDRESS 5710 Spinnaker Loop	CITY-ST-ZIP Lady Lake, FL. 32159 ☐ Delete	STREET ADDRESS	CITY-ST-ZIP ☐ Change ☐ Addition
TITLE Vice President/Sec ☐ Delete	NAME Gustavo Huaroto	TITLE	NAME ☐ Change ☐ Addition
STREET ADDRESS 6117 Spinnaker Loop	CITY-ST-ZIP Lady Lake, FL. 32159 ☐ Delete	STREET ADDRESS	CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ Delete	NAME	TITLE	NAME ☐ Change ☐ Addition
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE ☐ Delete	NAME	TITLE	NAME ☐ Change ☐ Addition
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE ☐ Delete	NAME	TITLE	NAME ☐ Change ☐ Addition
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP

13. I 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 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, without other like empowered.

SIGNATURE:  Gustavo Huaroto, Vice President
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(352) 750-6755 4/26/2001

CR20034 (1/1/00)