


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J50094</b> 1. Entity Name HUN-HO 104, INC.	
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Principal Place of Business 5802 N. ARMENIA AVE., BLDG. 6 TAMPA, FL 33603	Mailing Address 5802 N. ARMENIA AVE., BLDG. 6 TAMPA, FL 33603
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02082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2749733	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  LONG, MARK E. 15421 BELLAMY BROTHERS BLVD DADE CITY, FL 33523
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____</small>

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HEARN, JAMES R. 136 LAKE SHORE DR. N. PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LONG, MARK E. 2122 ARROW GRASS DR 204 ZEPHYRHILLS, FL 33543
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000831284 02/27/08-80012-004 150.00
<b>DO NOT WRITE IN THIS SPACE</b>

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: <u>MARK LONG</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>2-14-08</u> <small>Date</small>	Daytime Phone # <u>813 8706111</u> <small>Daytime Phone #</small>