2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000047947

1. Entity Name
H&P INNOVATORS INC.

Principal Place of Business	Mailing Address
5600 FOREST OAKS TERRACE DELRAY BEACH, FL 33484	5600 FOREST OAKS TERRACE DELRAY BEACH, FL 33484

DO NOT WRITE IN THIS SPACE

01052004   No Chg-P   CR2E034 (10/03)

4. FEI Number
65-1102987

Applied For
Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139

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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_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Pd-check #1014

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS		
TITLE	D		
NAME	SILKEN, HOWARD		
STREET ADDRESS	5600 FOREST OAKS TERRACE		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		
TITLE	V		
NAME	SILKEN, PAULA		
STREET ADDRESS	5600 FOREST OAKS TERR		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		
TITLE			
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CITY-ST-ZIP			

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01/26/04-80031-008 150.00

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12. 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 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: *Howard Silken* HOWARD SILKEN   Jan 22, 2004   561-496-1140
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #