

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 25, 2005 8:00 am
Secretary of State

07-08-2005 90023 041 ***150.00

DOCUMENT # P04000171256 1. Entity Name HOOPER FOODS, INC.																																																																																																																																																																	
Principal Place of Business 6560 WEST ROGERS CIRCLE 14 BOCA RATON, FL 33487			Mailing Address 6560 WEST ROGERS CIRCLE 14 BOCA RATON, FL 33487																																																																																																																																																														
2. Principal Place of Business		3. Mailing Address																																																																																																																																																															
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																															
City & State		City & State		06302005 Chg-P CRZE034 (10/03)																																																																																																																																																													
Zip		Country		4. FEI Number <div style="font-size: 24px; font-weight: bold;">20-2044894</div>																																																																																																																																																													
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																																																																															
6. Name and Address of Current Registered Agent CAVAYERO, AMY 6560 WEST ROGERS CIRCLE 14 BOCA RATON, FL 33487			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																																																																																														
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 removing)</small>																																																																																																																																																																	
FILE NOW!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fee																																																																																																																																																													
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																																																																																																																																																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>P.D</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>HOOPER, DWAYNE</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>6560 WEST ROGERS CIRCLE</td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td>BOCA RATON, FL 33487</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td>VP.D</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CAVAYERO, AMY</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>6560 WEST ROGERS CIRCLE</td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td>BOCA RATON, FL 33487</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td>S.D</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CAVAYERO, STEPHEN</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>6560 WEST ROGERS CIRCLE</td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td>BOCA RATON, FL 33487</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td>T.D</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CAVAYERO, RICHARD</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>6560 WEST ROGERS CIRCLE</td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td>BOCA RATON, FL 33487</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	P.D		NAME			STREET ADDRESS	HOOPER, DWAYNE		STREET ADDRESS			CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP				BOCA RATON, FL 33487					NAME	VP.D		NAME			STREET ADDRESS	CAVAYERO, AMY		STREET ADDRESS			CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP				BOCA RATON, FL 33487					NAME	S.D		NAME			STREET ADDRESS	CAVAYERO, STEPHEN		STREET ADDRESS			CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP				BOCA RATON, FL 33487					NAME	T.D		NAME			STREET ADDRESS	CAVAYERO, RICHARD		STREET ADDRESS			CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP				BOCA RATON, FL 33487					NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP									NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP								
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																																																														
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																												
NAME	P.D		NAME																																																																																																																																																														
STREET ADDRESS	HOOPER, DWAYNE		STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP																																																																																																																																																														
	BOCA RATON, FL 33487																																																																																																																																																																
NAME	VP.D		NAME																																																																																																																																																														
STREET ADDRESS	CAVAYERO, AMY		STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP																																																																																																																																																														
	BOCA RATON, FL 33487																																																																																																																																																																
NAME	S.D		NAME																																																																																																																																																														
STREET ADDRESS	CAVAYERO, STEPHEN		STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP																																																																																																																																																														
	BOCA RATON, FL 33487																																																																																																																																																																
NAME	T.D		NAME																																																																																																																																																														
STREET ADDRESS	CAVAYERO, RICHARD		STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP	6560 WEST ROGERS CIRCLE		CITY- ST- ZIP																																																																																																																																																														
	BOCA RATON, FL 33487																																																																																																																																																																
NAME			NAME																																																																																																																																																														
STREET ADDRESS			STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP			CITY- ST- ZIP																																																																																																																																																														
NAME			NAME																																																																																																																																																														
STREET ADDRESS			STREET ADDRESS																																																																																																																																																														
CITY- ST- ZIP			CITY- ST- ZIP																																																																																																																																																														
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(G), 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 filer empowered.																																																																																																																																																																	
SIGNATURE: July 1, 2005																																																																																																																																																																	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>																																																																																																																																																																	

ATTACHMENT

66026424

Hooper Foods, Inc

August 6th, 2005

Florida Department of State
Divisions of Corporations,
Attention: Kathy Ashton
P.O. Box 1500, Tallahassee, Florida 32302-1500

Subject: **Hooper Foods, Inc.**

Reference Number: **P04000171256**
Annual Report/Uniform Business Report

Dear Kathy,

As per our recent telephone conversation of Friday, August 6th (about related late fees imposed due to our late filing), please note that we did not receive the filing document. As a long time Florida Corporation we have always filed on time and submitted our payments accordingly. At this time, I am requesting that you accept our payment of \$150.00, and excuse our additional late fee.

Thank you in advance for your consideration and assistance.

Sincerely,



Stephen B. Cavayero
President