

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000114971

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** HEALTH INTERNATIONAL PRODUCTS, INC.

**Current Principal Place of Business:**

9745 INTERNATIONAL COURT NORTH  
ST PETERSBURG, FL 33716

**New Principal Place of Business:**

9216 PALM RIVER ROAD  
SUITE 203  
TAMPA, FL 33619

**Current Mailing Address:**

9745 INTERNATIONAL COURT NORTH  
ST PETERSBURG, FL 33716

**New Mailing Address:**

9216 PALM RIVER ROAD  
SUITE 203  
TAMPA, FL 33619

**FEI Number:** 26-1267292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JAMES W. CUSACK, P.A.  
4090 LAGUNA ST  
SECOND FLOOR  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

LASKOWSKI, PETER  
9216 PALM RIVER ROAD  
SUITE 203  
TAMPA, FL 33619 US

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: PETER LASKOWSKI

02/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LASKOWSKI, PETER  
Address: 9216 PALM RIVER ROAD SUITE 203  
City-St-Zip: TAMPA, FL 33619

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PETER LASKOWSKI

PRES

02/17/2011

Electronic Signature of Signing Officer or Director

Date