

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Matham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P93000025195 (7)**

1. Corporation Name  
**HPC INTERNATIONAL CORPORATION**



Principal Place of Business: **175 FOUNTAINBLEAU BLVD #2G7 MIAMI FL 33172**  
 Mailing Address: **175 FOUNTAINBLEAU BLVD #2G7 MIAMI FL 33172**

2. Principal Place of Business: **175 FOUNTAINBLEAU BLVD**  
 State, Apt. #, etc: **MIAMI FL 33172**  
 2a. Mailing Address: **175 FOUNTAINBLEAU BLVD**  
 State, Apt. #, etc: **MIAMI FL 33172**  
 27. **IR13**  
 City & State: **MIAMI FL**  
 28. **MIAMI FL**  
 Zip: **33172** Country: **USA**

3. Date Incorporated or Qualified: **04/06/1993** 3a. Date of Last Report: **07/05/1995**  
 4. EIN Number: **65-0413991**  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

**HERRERA, ERNESTO A  
 19900 NW 37TH AVE #A45  
 MIAMI FL 33056**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 85 Zip Code  
**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the Current Registered Agent

Signature of the New Registered Agent

ESL

12. OFFICERS AND DIRECTORS

TITLE	PTD	[ ] DELETE
NAME	HERRERA, ERNESTO	
STREET ADDRESS	19900 NW 37TH AVE #A45	
CITY-STATE-ZIP	MIAMI FL 33056-1702	
TITLE	VSD	[ ] DELETE
NAME	ROJAS, ELENA A	
STREET ADDRESS	19900 NW 37TH AVE #A45	
CITY-STATE-ZIP	MIAMI FL 33056-1702	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	[ ] Change [ ] Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-STATE-ZIP	[ ] Change [ ] Addition
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY-STATE-ZIP	[ ] Change [ ] Addition
31. TITLE	
32. NAME	
33. STREET ADDRESS	
34. CITY-STATE-ZIP	[ ] Change [ ] Addition
41. TITLE	
42. NAME	
43. STREET ADDRESS	
44. CITY-STATE-ZIP	[ ] Change [ ] Addition
51. TITLE	
52. NAME	
53. STREET ADDRESS	
54. CITY-STATE-ZIP	[ ] Change [ ] Addition
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 its registered or transferor empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an affidavit with an affidavit.

SIGNATURE:   
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-96 K 551-2795

CR2E034 (12/95)