

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022229

Entity Name: HTP SUPPLY, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

8123 NW 29TH STREET
MIAMI, FL 33122

Current Mailing Address:

8123 NW 29TH STREET
MIAMI, FL 33122

New Principal Place of Business:

%ENRIQUE LORENZO CPA
13032 SW 5TH STREET
MIAMI, FL 331841216 US

New Mailing Address:

%ENRIQUE LORENZO CPA
13032 SW 5TH STREET
MIAMI, FL 331841216

FEI Number: 65-0578828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
#1600
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUGHES, ALUN A
Address: 749 CRANAON BLVD 212
City-St-Zip: KEY BISCAYNE, FL

Title: VSD () Delete
Name: HUGHES, ELIZABETH
Address: 2 GROVE ISLE DR APT 1203
City-St-Zip: COCONUT GROVE, FL

Title: VPT () Delete
Name: HUGHES, GARETH H
Address: 2 GROVE ISLE DR APT 1203
City-St-Zip: COCONUT GROVE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUGHES, ALUN A
Address: 1121 CRANDON BLVD., APT. D-1002
City-St-Zip: KEY BISCAYNE, FL 331492775 US

Title: VSD (X) Change () Addition
Name: HUGHES, ELIZABETH
Address: 1121 CRANDON BLVD., APT. D-1002
City-St-Zip: COCONUT GROVE, FL 331492775 US

Title: VPT (X) Change () Addition
Name: HUGHES, GARETH
Address: 1121 CRANDON BLVD., APT. D-1002
City-St-Zip: COCONUT GROVE, FL 331492775 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ALUN A. HUGHES

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date