2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2004 08:00 AM te

DOCUMENT # P97000104824 1. Entity Name H & P CREATIONS, INC.			Secretary of Sta		
1776 CHALLEN AVE	vairing Address 1776 CHALLEN AVE JACKSONVILLE, FL 32205				
DO NOT WRITE IN THIS SPACE			03042004 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For		
· • ·	The second s		59-3482336 5. Certificate of Status Desi		Not Applicable 75 Additional Required
6. Name and Address of Current Reg HARRIS, VIRGINIA E 1776 CHALLEN AVE JACKSONVILLE, FL 32205	istered Agent		DO NOT IN THIS		
The above named entity submits this statement for the the obligations of registered agent. SIGNATURE	purpose of changing its registered of	office or register	ed agent, or both, in the State	of Florida. 1 am fami	liar with, and accept
Signature, typod or printed names of registered agent and the FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	MOTE, Registered Ap MOTE, Registered Ap Selection Campaign Financin Trust Fund Contribution.	ıg \$5.	.00 May Be	0000079198 3/04-80056-	010 150.00
10. OFFICERS AND DIRI ITTLE PTD NAME HARRIS, VIRGINIA STREET ADDRESS 1776 CHALLEN AVE JACKSONVILLE, FL 32205 ITTLE VSD NAME POWELL, LEAH M STREET ADDRESS 1776 CHALLEN AVE CITY-ST-ZIP JACKSONVILLE, FL 32205	ECTORS				
UTILE NAME STREET ADDRESS CITY-ST-ZIP ETILE			DO NOT	in the second of the	
NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE	
ITLE NAME STREET ADDRESS CITY-ST-ZIP					-
IITLE NAME STREET ADDRESS CITY-SI-7IP		1. 24. 1. 7	and the second s		
 I hereby certify that the information supplied with this indicated on this report or supplemental report is true of the corporation or the receiver or trustee empower changed, or on an attachment with an address, with 	ifiling does not qualify for the exemple and accurate and that my signature got to execute this report as required an other like empowered.	tion stated in Se shall have the by Chapter 607	ection 119.07(3)(i), Florida Stat same legal effect as if made u 7, Florida Statutes; and that m	utes. I further certify rider cath; that I am a name appears in Bl	that the information an officer or director ock 10 or Block 11 if
SIGNATURE SIGNATURE AND TYPED OF PRINT	TED NAME OF SIGNING OFFICER OR DIRECTOR	<u> </u>	3-50°	1 704 S	87 2748 ne Phone s