## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 06, 2004 08:00 AM Secretary of State **DOCUMENT # V14058** 1. Entity Name H & P GRAPHIC PRODUCTIONS, INC. Principal Place of Business Mailing Address 2632 VERDE LANE 2632 VERDE LANE WINTER PARK, FL 32792 WINTER PARK, FL 32792 US CR2E034 (10/03) 02162004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0316222 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEREGO, SUSAN DO NOT WRITE 2632 VERDE LANE WINTER PARK, FL 32792 IN THIS SPACE 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. (NOTE, Registered Agent algosture required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees U00000078104 <del>03/00/04 00014 010 150 na</del> 10. OFFICERS AND DIRECTORS TITLE PEREGO, SUSAN MAKE STREET ADDRESS 2632 VERDE LA CITY-ST-7/P WINTER PARK, FL 32792 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). 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 exposite 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 all officer like empowered.

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daylime Phone #

FILED