

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L06024

**Entity Name:** VON HAWK RESTORATION LABORATORIES, INC.

**Current Principal Place of Business:**

24987 COUNTY RD 42  
PAISLEY, FL 32767

**Current Mailing Address:**

24987 COUNTY RD 42  
P.O. BOX 546  
PAISLEY, FL 32767

**FEI Number:** 59-2971299

**Certificate of Status Desired:** No

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

VON HAWK, ALEXANDRA M.  
24987 COUNTY RD 42  
PAISLEY, FL 32767 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name VON HAWK, ALEXANDRA M  
Address 24987 COUNTY RD 42  
City-State-Zip: PAISLEY FL 32767

*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:** ALEXANDRA VON HAWK

**DIRECTOR**

**03/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date