

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90056 040 ***150.00

DOCUMENT # 613338

1. Corporation Name

HAWKS REFRIGERATION AIR CONDITIONING, INC.

Principal Place of Business

4715 N CLARK AVE
TAMPA FL 33614

Mailing Address

4715 N CLARK AVE
TAMPA FL 33614

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/16/1979

4. FEI Number

59-1951743

Applied For

Not Applicable

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 owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

HAWKS, PAUL
602 W CURTIS
TAMPA FL 33603

10. Name and Address of New Registered Agent

81 Name

Ulrike Harris

82 Street Address (P.O. Box Number is Not Acceptable)

708 Jackson Street

83

84 City

Tampa

FL

85 Zip Code

33602

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

Ulrike Harris

ULRIKE HARRIS

4-17-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME HAWKS, PAUL D.
STREET ADDRESS 602 W CURTIS
CITY-ST-ZIP TAMPA FL

TITLE VP ☒ DELETE

NAME HAWKS, PAUL D.
STREET ADDRESS 602 W. CURTIS
CITY-ST-ZIP TAMPA FL

TITLE S ☒ DELETE

NAME HAWKS, MILDRED M
STREET ADDRESS 14241 LITTLE LAKE RD
CITY-ST-ZIP SPRINGHILL FL

TITLE T ☒ DELETE

NAME HAWKS, MILDRED M.
STREET ADDRESS 14241 LITTLE LAKE ROAD
CITY-ST-ZIP SPRINGHILL FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME Harris, Joseph M

1.3 STREET ADDRESS 8202 Stonerwood Drive

1.4 CITY-ST-ZIP Riverview, FL. 33569

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the receiver or trustee 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Signature and typed or printed name of signing officer or director

Ulrike Harris Pres. 4/17/99 813-879-0788

Date

Daytime Phone #

0579033

CR2E034 (11/98)