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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name 646213

(9)

HAWCO PROPERTIES, INC.

FILED Feb 12 1998 8:00am Secretary of State

|--|

Principal Plac	e of Business	Mailing Address	S		A ACCUSATE DATE OF THE STATE OF	(B) (B) (\$40 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1
1600 SE 17TH ST. 1600 S.E. 17TH ST. #30 3308 FORT LAUDERDALE FL 3					DO NOT WRITE IN THE	NO ODAGE
FORT LAUDERDALE FL 33316 US US					DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE
					11/27/1979	
2. Principal P	lace of Business	2e. Mailing Addi	ress		4. FEI Number	Applied For
21		26			59-1992410	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #	, etc.			\$8.75 Additional
22		27			Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip ∷∃		buntry	8. This corporation owes or has paid the o	
24	25 9. Name and Address of Curre	29	30	1	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
WE	EISZ, MICHEL OCIAOVSKI	ur negisteren Agetit		81 Name	10. Name and Address of New Registers	d Agent
				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		is 2.,
3250 MARY STREET-SUITE 303 MIAMI FL 33133					ress (P.O. Box Number is Not Acceptable)	-01 -/
TAIL?	4MI FL 33133			83 9 0	1 ronu de beox	15\v4
					N 601	
				84 City	ral Gables F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 05	02 and 607 1508. Flori	da Statutos, the	above-named corr	poration submits this statement for the purpose	
office or r	egistered agent, or both, in the State	e of Florida. Such char	nge was authoriz	ed by the corpora	tion's board of directors. I hereby accept the a	ppointment as registered
agent. I a	m familiar with, and accept the oblig	jations of, Section 607.	.0505, Florida St	atules.		
SIGNATURE	Signature, typed or printed name of registered ag	nent and Urin R productible	(NC)11 Barrielo	red Agent signature requi	red when reinstating) DATE	
12.		ND DIRECTORS	13		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PST	□ DI		TITLE		Change Addition
NAME	CULLIFER, RICHARD H		1.2	NAME		
STREET ADDRESS	4270 SW 54TH AVE		1.3 \$			
CITY-ST-ZIP	DAVIE FL 33314			CITY-ST-ZIP		
TITLE		☐ De	ELĒTE 2.1	TITLE		☐ Change ☐ Addition
NAME			2.2	NAME		
STREET ADDRESS			2.3	STREET ADDRESS		
CITY+ST-ZIP				CITY - ST - ZIP		
TITLE		☐ DE	ELETE 3.1	TITLE		☐ Change ☐ Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3	STREET ADDRESS		
CITY-ST-ZIP		·	·	CITY-ST-ZIP		
TITLE		LJ DE		TITLE		Change Addition
NAME			4.2	NAME		
STREET ADDRESS			4.3	STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		CITY-ST-ZIP		
TITLE		☐ DE		TITLE		☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP		The same of the sa		CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	0
TITLE		OE		TITLE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-7IP			■ 6.4	CITY-ST-7IP		

14. I horeby 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 supplementation and 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 required employered 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 attractions and the same legal effect as if made under oath; that I am an officer or director of the corporation or the required employers.

SIGNATURE: