

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**

05-18-2001 91595 030 \*\*\*150.00

**552321**

**DOCUMENT #** P00000052208

**1. Entity Name**  
 H & K CONSTRUCTION & ROOFING, INC.

<b>Principal Place of Business</b> 2848 SHAWNEE ROAD WEST PALM BEACH, FL 33406	<b>Mailing Address</b> 2848 SHAWNEE ROAD WEST PALM BEACH, FL 33406
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<b>2. Principal Place of Business</b> 1599 S.W. 30th AVENUE Suite, Apt. #, etc.	<b>3. Mailing Address</b> c/o STAHL & ASSOCIATES Suite, Apt. #, etc.
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<b>SUITE 11</b> City & State BOYNTON BEACH, FL	<b>138 N. SWINTON AVENUE</b> City & State DELRAY BEACH, FL
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<b>4. FEI Number</b> 65-1009937	<b>Applied For</b> Not Applicable
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DO NOT WRITE IN THIS SPACE

<b>Zip</b> 33426	<b>Country</b> USA	<b>Zip</b> 33444	<b>Country</b> USA	<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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**6. Name and Address of Current Registered Agent**

HARDY, THIERRY  
 2848 SHAWNEE ROAD  
 WEST PALM BEACH, FL 33406

**7. Name and Address of New Registered Agent**

<b>Name</b> HARDY, THIERRY
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 1599 S.W. 30th AVENUE
<b>SUITE 11</b>
<b>City</b> BOYNTON BEACH
<b>FL</b> <b>Zip Code</b> 33406

**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.**

**SIGNATURE** \_\_\_\_\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.**  **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

<b>TITLE</b> DST	<b>NAME</b> HARDY, THIERRY <input type="checkbox"/> Delete
<b>STREET ADDRESS</b> 5750 CAMINO DEL SOL APT 201	<b>CITY-ST-ZIP</b> BOCA RATON, FL 33433
<b>TITLE</b> P	<b>NAME</b> MALSCHALCK, GAETAN <input checked="" type="checkbox"/> Delete
<b>STREET ADDRESS</b> 1436-B SW 25th AVENUE	<b>CITY-ST-ZIP</b> BOYNTON BEACH, FL 33426
<b>TITLE</b> V	<b>NAME</b> KATINGER, MICHELLE M <input checked="" type="checkbox"/> Delete
<b>STREET ADDRESS</b> 1021 EGREMONT DRIVE	<b>CITY-ST-ZIP</b> WEST PALM BEACH, FL 33406
<b>TITLE</b> V	<b>NAME</b> KENYON, MARTIN C <input type="checkbox"/> Delete
<b>STREET ADDRESS</b> 251 HOMEWOOD BLVD	<b>CITY-ST-ZIP</b> DELRAY BEACH, FL 33445
<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Delete
<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>
<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Delete
<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b> DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> HARDY, THIERRY	
<b>STREET ADDRESS</b> 5750 CAMINO DEL SOL APT 201	
<b>CITY-ST-ZIP</b> BOCA RATON, FL 33433	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

CR2E034 (11/00)

**13. I hereby certify that the information supplied in 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 report or supplement thereto 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**  **THIERRY HARDY, PRESIDENT**

**4/27/01**  
 Date Daytime Phone #