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

NAME

STREET ADDRESS

FILED May 05 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P92000008485 (4) HAVIT PRODUCTS, INC. Principal Place of Business Mailing Address 7707 ELLIS ROAD 7707 ELLIS ROAD WEST MELBOURNE FL 32904-1187 WEST MELBOURNE FL 32904-1187 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3176476 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TURMAN, JAMES 7707 ELLIS ROAD Street Address (P.O. Box Number is Not Acceptable) 82 MELBOURNE FL 32904 83 Zip Code 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 agont, 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 Signature, typing or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE HAISTEN, KEITH NAME 1.2 NAME CR2E034 STREET ADDRESS **5021 CARRIAGE LAKE DRIVE** 1.3 STREET ADDRESS **ROSWELL GA 30075** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE STDV 21 TITLE TURMAN, JAMES NAME 2.2 NAME 7707 ELLIS ROAD STREET ADDRESS 2.3 STREET ADDRESS West Melbourne fl 32904 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 31 TITLE NAME STREET ADDRESS 3 3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Addition Channe TITLE 6.1 TITLE

14. Thereby 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 acquirate 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 recovery of the true and acquirate 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 recovery of the corporation of the recovery of the r 4-22-98 401.724-1840 SIGNATURE

6.2 NAME

6.3 STREET ADDRESS