

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

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|---------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| PROFIT CORPORATION ANNUAL REPORT 1999 |  | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # P940000549070

1. Corporation Name

HAWK CHANNEL BAR + GRILLS INC.

Principal Place of Business

Mailing Address

85501 US 1
ISLAMORA DIA FL. 33036

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7-20-94

4. FEI Number

650505582

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

☒

[] No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

GARY S. HUNT
127 PALERMO DR
ISLAMORADA, FL 33036

81. Name

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

83.

84. City

FL

85.

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 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

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 PRESIDENT [] DELETE

NAME KYLE AN. FARNSWORTH

STREET ADDRESS 3700 HILLSDALE RD

CITY-ST-ZIP LOUISVILLE, KY 40227

TITLE VICE PRESIDENT [] DELETE

NAME GARY S. HUNT

STREET ADDRESS 127 PALERMO DR.

CITY-ST-ZIP ISLAMORADA, FL 33036

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

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****158.75 ****158.75

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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:

GARY S. HUNT V.P.

GARY S. HUNT

4-30-99

3056645097

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

EXEMPTION PROVIDED

CR2E034 (11/98)