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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400062505 (0)

TOMAHAWK, INC.

	of Business

Mailing Address

DOOR OF THE ST

FILED Jun 10 1997 8:00am Secretary of State



MIAMI FL 3315	IAMI FL 33157 MIAMI FL 33157-3449								
							3. Date Incorporated or Qualified 08/22/1994	3a. Date of Last Report 05/01/1996	
2. Principal P	2. Principal Place of Business		2	2a. Mailing Address		4. FEI Number	Applied For		
21		26	26		65-0518302	Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
22		27	27		B. Certificate of Status Desired	Fee Required			
City & State		<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be			
23	23			28		Trust Fund Contribution Added to Fees			
Zip 24		Country		Zip Country			8. This corporation has liability for intangible tax under s. 199.032,		
24	0 Name er		29 of Current Reg		30		Florida Statutes 10. Name and Address of New R	Yes DH+Vo	
401			or Current Neg	natered Agent	8	1 Name	10. Name and Address of New A	egistered Agent	
AGU	JILERA, JAIME	E OT			L	- Ivanic			
	9330 SW 165TH ST MIAMI FL 33157			8	82 Street Address (P.O. Box Number is Not Acceptable)				
MIA	MI PL 3319/				8:				
] "								J	
					84	City		FL 85 Zip Code	
11º Purcuant	to the provision	s of Section	ne 607 0502 and	607 1508 Florida Stati	iton the above	in named o	ornaration authorite this statement for the		
office or r	egislered agon	it, or both i	n the State of Flo	rida. Such change was	authorized b	by the corpo	orporation submits this statement for the tration's board of directors. I hereby acco	purpose of changing its registered in the appointment as registered	
agent. La	m t am iliar with,	and accep	ithe obligations	of, Section 607.0505, F	Iorida Statute	OS.		·	
SIGNATURE	Signature Ivoed or	nrinted name of	registered agent and !	dle it applicable (NC)	NI - Frankstown A	ant constant to	quitee when reinstating)	DATE	
12.	organization (ICERS AND DIR		13.	joni, aignatore re	ADDITIONS/CHANGES TO OFFI		
TITLE	DP			DELETE	1.1 TITLE			Change Addition	
NAME	AGUILERA,	JAIME			1.2 NAME				
STREET ADDRESS	9330 SW 1				1.3 STREE	T ADDRESS		1	
CITY-ST-ZIP	MIAMI FL 3				1.4 CHY-	1			
TITLE	DV			☐ DELETE	2.1 TITLE			Change Addition	
NAME	AGUILERA,	YELBA L			2.2 NAME				
STREET ADDRESS	9330 SW 1				2 3 STHEE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 3	3157			2. 4 CITY	ST · ZIP			
TITLE	,			DELETE	3.1 TITLE			Change Addition	
NAME	,				3.2 NAME			į	
STREET ADDRESS					3.3 STREE	I ADDRESS			
CITY-ST-ZIP		····			3.4. CITY -	S1 - 2(P			
TITLE				DELETE	4.1 Tillet			Change Addition	
NAME					4. 2 NAM	.]			
STREET ADDRESS					4.3 STREE	1 ADDRESS			
CITY-ST-ZIP	· 				4.4 CITY -	ST-ZIF			
TITLE				DELETE	5.1 111LE			☐ Change ☐ Addition	
NAME					5.2 NAME			•	
STREET ADDRESS					5.9 STREE	T ADDRESS			
CITY-ST-ZIP					5 4 CITY-	ST - Z#P			
TITLE				DELETE"	6.1 HILE		-	Change Addition	
NAME					6.2 NAME			ì	
STREET ADDRESS					6.3 STREE	1 Address			
CITY-ST-ZIP					6.4 CITY-	ST-ZIP			

14. I do 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 supplendental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of insteed 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 each accurate an address.