2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P95000044011 DOCUMENT

1. Entity Name



May 05, 2003 8:00 am Secretary of State

05-05-2003 90293 033 ***150.00

C-HAWK	INVEST	MENTS, INC.		•											
Principal Place of Business 1889 JESSICA COURT WINTER PARK FL 32789			Mailing Address 1889 JESSICA COURT WINTER PARK FL 32789))) 33))) 1			
2. Principal I	Place of Busir	ness	3. Mailing Address												
Suite, Apt. #, etc.			Suite, Apt. #, etc.			· <u>-</u> .			[] CHE	CK HEF	RE IF M.	AKING	CHANGES	3
City & Sta	te		City & State			4			El Number	59-	33 195	15			pplied For ot Applicable
Zip		Country	Zip		Cour	ntry		5. Ce	ertificate c	f Status	Desired	; [8.75 Ad ee Requir	
	6. Name	and Address of Current	Reg <u>is</u> tere	d Agent				7. Na	ame and	ddress	of New	/ Regist	tered A	gent	
GIMENEZ, CARLOS				Name											
	SSICA CT					Street Address (P.O. Box Number is Not Acceptable)									
	PARK FL 32	379n				<u> </u>									
AMMALEN	FARR FL 34	2709				City							FL	Zip Cod	de
	e named entity tions of regist	y submits this statement for ered agent.	r the purp	ose of changing its	register	ed office or r	egistere	d ager	nt, or both	, in the S	State of	Florida.		miliar with	, and accept
SIGNATURE				·											
	Signature, typed	or printed name of registered agent	and title if appl	licable. (NOTE	: Registere	d Agent signature	required v	when rein	nstating)				DATE		
Afte	r May 1, 200	! FEE IS \$150.00 I3 Fee will be \$550.00 Florida Department of	State						9. Elec Trus	tion Car t Fund C			ng 🗆		00 May Be d to Fees
10.		OFFICERS AND	DIRECTO	RS	11.			ADD	DITIONS/C	HANGE	S TO O	FFICER	S AND	DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, CARLOS SICA COURT		☐ Deléte	1									☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			□ Delete		L								Change	Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (