PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90177 048 ***158.75

DOCUMENT # **P9600007440** 1. Corporation Name HAWO, INC.

Principal Place 2000 BANKS R MARGATE FL 3 US	OAD #222	Mailing Address 2000 BANKS ROAD #222 MARGATE FL 33063 US	<u> </u>		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 0.1/02/14006
O Dissipal D	Uses of Business	2a, Mailing Address			01/23/1996 4, FEI Number Applied For
⊢ .	lace of Business	26. Walling Address			65-0746524 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27	27		5. Certificate of Status Desired Fee Required
City & Stat	e	City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	atry	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax. 10. Name and Address of New Registered Agent
<u> </u>	9. Name and Address of Cu	irrent Registered Agent		81 Name	10. Name and Address of New Registered Agent
SUHANDRON, KENNETH 441 S FEDERAL HWY DEERFIELD BEACH FL 33441 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				83 ± 2 84 City	Address (P.O. Box Number is Not Acceptable) 22 ATOMIC FL 85 Zip Code 33063
11. Pursuant office or r agent. I a	registered agent, or both, in the S im familiar with, and accept the o	tate of Florida. Such change was bligations of, Section 607.0505, F	authorized lorida Statu	by the corpo ites.	oration's board of directors. I hereby accept the appointment as registered
12.	3	S AND DIRECTORS	13.	rigent signature is	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 T/T	LE	☐ Change ☐ Addition
NAME	WOLF, HAGEN		1.2 NA	ME	P Ys Dard Hana
STREET ADDRESS	441 S FEDERAL HWY		1.3 ST	REET ADDRESS	2000 Bon's Road #222 Lorant Planda 33063
CITY-ST-ZIP	DEERFIELD BEACH FL-		1.4 CI	Y-ST-ZIP	
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TITLE		☐ DELETE		Y-ST-ZIP LE	Change ☐ Addition

CITY-ST-ZIP 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.

64 CITY-ST-ZIP

SIGNATURE: