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 # P9600061744 (4)

HEATWAVE INCORPORATED

Principal Place of Business 761 SUGARLOAF BLVD. SUMMERLAND KEY FL 33042 Mailing Address

761 SUGARLOAF BLVD. SUMMERLAND KEY FL 33042-3661 FILED
May 28 1997 8:00am
Secretary of State



			3. Date Incorporated or Qualified 07/09/1996	3a. Date of Last Report
2. Principal P	Place of Business 2a. Mailing Address		4. FEI Number	Applied For
101 (Greymon Drive 🔤 P.O. Box	<i>6339</i>	65-066728	
Suite Apt.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	رسو ر ح	6. Election Campaign Financing	\$5.00 May Be
3 West	rain Beach, FL 28 West rain	Beach, FL	Trust Fund Contribution	Added to Fees
_ Zp □ ===	Country Zip	Country	8. This corporation has liability for i	
4 3340	25 Kalm Beach 29 33405-6335	30 Palm Beach	Florida Statutes	Yes No
	9. Name and Address of Current Registered Agent		10. Name and Address of New Re	glatered Agent
	K, ALBERT J	81 Name	lilliam N. Kirk	
	SUGARLOAF BLVD.	82 Street Add	less (P.O. Box Number is Not Acceptab	le)
SUM	AMERLAND KEY FL 33042		Greymon Drive	
		83		
		84 City	7575	85 Zip Code
		Wes	st talm Keach	FL 32 785
11. Parsuant	to the provisions of Sections 607.0502 and 607.1508, Florida Stat	utes, the above-named cor	poration submits this statement for the p	urpose of changing its registered
office of r agent. La	registered agent, or both, in the State of Florida, Such change was im familiar with, and accept the oblidations of, Section 607.0505, I	s authorized by the corpora Florida Statutes.	ition's board of directors. I hereby accep	of the appointment as registered
	9.141:00 William	N UV	5	17-97
SIGNATURE	Signature: typed or printed name of registered agent and title if applicable (N	OTE: Registered Agent signature requ	uired when reinstating)	DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
nte	D DELETE	1.1 TITLE	/b	Change Addition
NAME.	KIRK, KATHERINE	1.2 NAME	otherine Kirk	•
STREET ADORESS	2414 N WOODLAWN, SUITE 201	1.3 STREET ADDRESS	Graymon Drive	
CHTY-\$1-ZIF	WICHITA KS 67220	1.4 CiTY-ST-ZIP	lest Palm Beach, FL	33405
Hitt	☐ DELETE	2 1 TITLE	Islanda Jan	Change Addition
NAME		2 2 NAME	tillian Al Wink	
STREET ADURESS			lilliam N. Kirk I Greymon Drive	
CHEY-SI-2if			est Polm Boach, FL 3	22415
INTLE	DELETE		D	☐ Change ■ Addition
NAME			· · · · · · · · · · · · · · · · · · ·	Z., A
STREET ADORESS		3.3 STREET ADDRESS	kaya A. Kirk	e.
			a N. Ridgewood Driv	
DITY-ST-ZIP DITUE	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	KNITO NO 61400	Change Addition
NAME	based Pattern.	4. 2 NAME	Hart IT Wirk	
		172	BI N. Ridgewood Driv	e
STREET ADORESS		4.3 STREET ADDRESS	BINI HIGH LOONS	
COLY-SE ZIP INLE	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	ichita, Ko GYALLO	Change Addition
İ				E CHANGE E MOUNTAIN
NAME		5.2 NAME	•	
STREET ADDRESS		5.3 STREET ADDRESS		
City - ST - ZIP	Dr. FYF	5.4 CITY - ST - ZIP		[] Ac [] \$1.00
TITLE	DÉLETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST ZIP		6.4 CITY - ST - ZIP		
I do here!	by certify that the information supplied with this filing does not gua	alify for the exemption state	d in Section 119.07(3)(i). Florida Statuter	s. 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.