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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000090310 (9)

I - HAWK SOFTWARE INTERNATIONAL CORP.

Principal Place of Business 8910 MIRAMAR PARKWAY

Mailing Address

SUITE 210-B

8910 MIRAMAR PARKWAY SUITE 210-B

**FILED** Mar 11 1998 8:00am Secretary of State



MIRAMAR FL 33025		MIRAMAR FL 33025				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 11/04/1996		
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For	
21		26				65-0704767		ot Applicable
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27	· L · _ · · · · · · · · · · · · · · · ·					equired
City & State	)	City & State				6. Election Campaign Financing	\$5.00	
23		28	T Co			Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the cur		angible No
24	9. Name and Address of Current	1 Bogletored Apont	30			Personal Property Tax due June 30.		
ADI		t nogistered Agent	+	B1	Name	IV. Name and Address of four Hogistored	ngon.	
	RAMSON, EDWARD			•	TABLETIO			
	70 NW 12 ST		Ī	B2	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	ITE 580		ŀ	В3				· · · · · · · · · · · · · · · · · · ·
WAY.	VMI FL 33126					<u> </u>		
			Ī	84	City	FL	85 Zip	Code
11. Pursuant l	to the provisions of Sections 607.0502	2 and 607.1508, Florida State	tutes, the ab	ove by	-named corpo	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing it	ts registered
agent. I ar	n familiar with, and accept the obliga	tions of, Section 607.0505,	Florida Stati	utos.		site death of directors. I horotoy accept the app	o. Altion do	. oglotorod
SIGNATURE	Signature, typed or printed name of registered ager	of and title if applicable (N	IOTE: Registered	Agen	nt signature required	d when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	PD	☐ DELETE	1.1 717	LE			☐ Change	Addition
NAME	CORDEIRO, CELSO		1.2 NA	ME				
STREET ADDRESS	2507 SW 177 AVE		1.3 ST	REE1 A	ADORESS			
CITY-ST-ZIP	MIRAMAR FL 33029		1.4 CIT	1.4 CITY-ST-ZIP				
TITLE	VD DE		2 1 TIT	2 1 TITLE			Change	Addition
NAME	SIMPSON, RICARDO		2.2 NA	ME	İ			
STREET ADDRESS	2347 SW 177 AVE.		2.3 ST	REET A	ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33029	<u>, ,</u>	2 4 CITY-S		T-ZIP			
TITLE	SD	☐ DELETE	3.1 TIT	LE			Change	Addition
NAME	ABRAMSON, EDWARD		3.2 NA	ME				
STREET ADDRESS	7270 NW 12 STREET, SUITE	580	3.3 \$1	REET #	address			
CITY-ST-ZIP	MIAMI FL 33126		3.4. CI	TY-\$1	T- ZIP			
TITLE		DELETE	4.1 TIT	LE	Ţ.	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			4. 2 NA	AME				
STREET ADDRESS			4.3 ST	REET A	ADORESS			
CITY-ST-ZIP			4.4 CI1	ry-st	- 2IP			
TITLE		☐ DELETE	5.1 TIT	LE			Change	☐ Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET A	ADDRESS			
CITY-ST-ZIP			5.4 CiT	Y-51	- ZIP			
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition
NAME			6.2 NA	ME	}			
STREET ADDRESS			6.3 ST	REET A	ADDRESS .			
CITY-ST-ZIP			6.4 CII	ry-st	r-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

BIRNALOW RICORDO SIMPSON

3-6-98 (954) 435-9981