FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** FLORIDA DEPARTMENT DE STATE Apr 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name P97000016974 (2) HACOTEC INC. Principal Place of Business Mailing Address 2368 BLAKE WAY 2366 BLAKE WAY OCOEE FL 34761 OCOEE FL 34761 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>02/19/1997</u> 2a. Mailing Address 4. FEI Numbe Applied For 2. Principal Place of Business Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite. Apt. #. etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 **Z**ip Country This corporation owes or has paid the current year Intangible Zip Country Yes □ No Personal Property Tax due June 30. 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Franklin, Erick 2368 BLAKE WAY 82 Street Address (P.O. Box Number is Not Acceptable) OCOEE FL 34761 83 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE. Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change □ DELETE 1.1 TITLE TITLE 1.2 NAME FRANKLIN, ERICK NAME 2368 BLAKE WAY 1.3 STREET ADDRESS STREET ADDRESS **OCOEE FL 34761** 1.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP 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

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE: ERICK

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

4/23/58

☐ Change

Addition