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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jul 13 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOGUMENT # P 970000 36113 TRE-HAWK, INC. We. P.O. Box 9699 Principal Place of Business Mailing
6/10 Suwanee Ave Tampa, 76 33604 Tampa, 71 33674 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified AMRIL 23, 1997 2. Principal Place of Business Applied For 2a. Mailing Address 9699 6110 Susuance Ave Suite, Apt. #, etc. Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees lamba 8. This corporation owes or has paid the current year Intangible USA ☐ Yes 33674 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 8 Ste. 195 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. ORMOND Beach, F1 84 Secreta SIGNATURE OFFICERS AND DIRECTORS 12. 13. Change Addition See /T Reas TREAS . DELETE 1.1 TITLE TITLE Lajuan Spakkowhawk Belinda Buchman 201 W. Lawrel # 1008 1.2 NAME NAME 6110 Suwanee Au 1.3 STREET ADDRESS STREET ADDRESS Tampa, 79 33602 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE ☐ Change Addition 2.1 THILE TITLE Robert Sparrowhauk 2 2 NAME NAME 6110 Suwanee Au 2.3 STREET ADDRESS STREET ADDRESS 71 33604 2 4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3 1 TITLE TITLE Res Keith Trepanier 3.2 NAMÉ NAME 3.3 STREET ADDRESS STREET ADDRESS tampa, 40 33604 34 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition 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 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE **61TITLE** 5000025885**4**5 -07<u>/14/98--</u>01064--038 NAME 6.2 NAME

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.

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

lawk Lajuan Sparrowhawk 4/1/18

CR2E034 (10/97)