2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2001 8:00 am Secretary of State DOÇUMENT # P9700065814 1. Entity Name HAWK COMPUTERS, INC. 05-01-2001 90072 043 ***150 00 Principal Place of Business Mailing Address 400 E ATLANTIC BLVD P.O. BOX 70205 FT LAUDERDALE FL 33307-0205 00044808 POMPANO BEACH FL 33060 3. Mailing Address 120 E. Oahland Park Blud. 2. Principal Place of Business 120E, Ockland Park Blud Suite. Apt # etc. Suite 105 City & State FT. Loruble rolale, FL Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 105 City & State FT. Loudlardok, FL 4. FEI Number Applied For 65-0771004 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Broward Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Geisel July 4 Street Address (P.O. Box Number is Not Acceptable) 120 E. Oakland Park islud. GEISEL, JUERGEN **400 E ATLANTIC BLVD** #23 Suite 105 POMPANO BEACH FL 33060 City FT. Lauder dale 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida SIGNATURE Greisel Jasergen 19570 printing full of applicable. (NOTE freg stored Agent signature experience) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PSTD **PSTD** Change Addition ☐ Delete 133 E TITLS Greisel. Juergen 120E. On Hond Part Blad STE 105 GEISEL, JUERGEN NAME STREET ADDRESS 400 E ATLANTIC BLVD #23 FT. Louderdale, FL 33334 CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ Change ☐ Addition TOTALE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete THE ☐ Change M Addition TITLE NAME NAMA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Addition Delete ☐ Chance T!T! F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Change Acdition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juergen Greisel PSTD Jurgen hairel 4/23/01 954-565-9903

SIGNATURE: Description of SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DESCRIPTION OF DESC