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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700068650 (5)

HAWK INVESTMENTS, INC.

FILED May 27 1998 8:00am Secretary of State

HAVE HAVESTIVIERES, INC.			
Principal Place of Business	Mailing Address		- I REGURDU UN EDUN IDEN DENN SOM EDIN EDIN EDIN ERRO 1975 ENDS DUNS DUNS DUNS IDDI
5481 N. FEDERAL HIGHWAY	5461 N. FEDERAL HIGHW	IA Y	
FT. LAUDERDALE FL 33308	FT. LAUDERDALE FL 3330		
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified 08/07/1997
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		65-0773/179 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 Ch. 8 Ch.	27		Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28	C	Trust Fund Contribution
Zip Country	7 _{(P}	Country	8. This corporation owes or has paid the current year Intangible
25 25 Name and Address of Current		30]	Personal Properly Tax due June 30. Yes No 10. Name and Address of New Registered Agent
O'CONNELL, BARBARA	Biologo Agolit	81 Name	10. Harris and Address of Heat Heatstern Walle
5481 N. FEDERAL HIGHWAY		T THE THE	
		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
FT. LAUDERDALE FL 33308		83	
÷		63	
		84 City	85 Zip Code
(0)	1007 4100 11 14 5		FL 18 2 P COUR
office or registered agent, or both, in the State of	of Florida. Such change was a	uthorized by the corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obliga	tions of, Section 607.0505, Flor	rida Statutes.	, , , ,
SIGNATURE			
Signature typed or profed name of rigislated ager 12. OFFICERS AND		Registered Agent signature require	
TITLE Prosident	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME BOLDAR OCEAN	e//	1.2 NAME	C Direction C Manufacture
STREET ADDRESS 619 NW 132	TERR	1.3 STREET ADDRESS	
CITY-ST-ZIP PLAN+u+: On	C/ 33325	1.3 STREET ADDRESS	
TITLE Prosident Ocean NAME Barbara Ocean STREET ADDRESS 619 71W 132 CITY-SI-ZIP PLANTYTION	DELETE	21 TITLE	Change Addition
NAME		22 NAME	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS		2.3 STHEET ADDRESS	
		The state of the s	
CITY-ST-ZIP	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP			
TITLE	DELETE	3.4. C(TY - ST - ZIP 4.1 T)TLE	☐ Change ☐ Addition
NAME	Frd Active		_ smaller
STREET ADDRESS		4. 2 NAME 4.3 STREET ADDRESS	
CITY-ST-ZIP			
TITLE	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME	C. Petric	5.2 NAME	
STREET ADDRESS			
į.		5.3 STREET ADDRESS	
City-St-ZiP	☐ DELETE	6.1 TITLE	Change Addition
			Conside C Maniful
NAME CYPETA ADDRESS		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

4. 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 armual 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.

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Burgan Oland

H-17-98