

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90113 035 ***150.00

DOCUMENT # P97000083353

1. Corporation Name
HARD KOR, INC.

Principal Place of Business
147 MIRAMAR AVENUE
ROYAL PALM BEACH FL 33411

Mailing Address
147 MIRAMAR AVENUE
ROYAL PALM BEACH FL 33411

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/25/1997

4. FEI Number

59-3476164

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 17382 SW 21 Court

Suite, Apt. #, etc.

22

City & State

23 Miramar, FL

Zip

24 33029

Country

25 U.S.A.

2a. Mailing Address

26 17382 SW 21 Court

Suite, Apt. #, etc.

27

City & State

28 Miramar, FL

Zip

29 33029

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

JAMES, KEITH A
1655 PALM BEACH LAKES BOULEVARD
SUITE 810, TOWER C
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME RODRIGUEZ, ERIC A
STREET ADDRESS 147 MIRAMAR AVENUE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☐ DELETE

NAME RODRIGUEZ, VILMA C
STREET ADDRESS 147 MIRAMAR AVENUE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☐ DELETE

NAME LORENZO, RICHARD
STREET ADDRESS 17382 S.W. 21ST COURT
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE D ☐ DELETE

NAME LORENZO, MARISELA
STREET ADDRESS 17382 S.W. 21ST COURT
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Rodriguez, Eric A.
1.3 STREET ADDRESS 157 yacht club way #111
1.4 CITY-ST-ZIP Hypoluxo, FL 33462

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Rodriguez, Vilma C.
2.3 STREET ADDRESS 157 yacht club way #111
2.4 CITY-ST-ZIP Hypoluxo, FL 33462

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE D ☒ Change ☐ Addition

4.2 NAME Marisela Lorenzo
4.3 STREET ADDRESS 17382 SW 21 court
4.4 CITY-ST-ZIP Pembroke Pines FL 3302

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-11-99 (954) 438-6349

0330634

CR2E034 (11/98)