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

**PROFIT CORPORATION** 

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Zip

City & State

FLORIDA DEPARTMENT OF STATE

May 22 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name HAWdy MAN. INC.

Principal Place of Business Mailing Address 7634 MASSACHUSEHS AVE. 7141 LEWAPE CINCLE NEW PORT Richey, FZ 34653.3022 NEW PORT Richfy, FL DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 4. FEI Number 2a, Mailing Address Applied For 2. Principal Place of Business Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees **1rust Fund Contribution** 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FREDY KRUMM ENACHER 7141 LENAPE CIRCLE Street Address (P.O. Box Number is Not Acceptable) NEW PORT Richfy, FL 34653 City Zip Code 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. [NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition DELETE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST-ZIP Change Addition 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2 4 CITY - ST - ZIP Change \_\_\_ Addition 3.1 1111.6 3.2 NAME

FILED

SIGNATURE 12, TITLE FREDY KRUMMFNACHER 7141 LENAPE CIACLE NEW POAT RICKEY FL 34653 NAME STREET ADDRESS CITY-ST-ZIP **1ITLE** FRANCIS L. WORWA NAME 7634 MASSACHUSETTS AVE STREET ADDRESS NEW PORT RICHEY, FL 34653 3012 CITY-ST-ZIP TITLE NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 5.1 THTLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 C/TY - S1 - 7/P DELETE Change 61 TITLE TITLE 900002536449 6.2 NAME NAME -05/27/98--01039--048 6.3 STREET ADDRESS STREET ADDRESS

\*\*\*150.00 14. Thereby 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 supplied exemption in the exemption stated in Section 119 07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied exemption in the exemption stated in Section 119 07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied exemption in the exemption stated in Section 119 07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied exemption in the exemption stated in Section 119 07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual report or supplied exemption indicated on this annual report of the corporation indicated on the supplied exemption indicated on this annual report of the corporation indicated on the supplied exemption indicated in the supplied exemption indicated on the supplied exemption indicated in the supplied exemption indicated exemption indicated exemption indicated exemption indicated exemption indicated exemption indicated exemption Block 12 or Block 13 if change ittachment with an address.