FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 A Land Company PROFIT . FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Karris ANNUAL REPORT KELARY OF STATE Secretary of State ^{องไร}เด่มี ดีรี cokhonatio 1999 DIVISION OF CORPORATIONS 99 AUG 10 PM 12: 52 DOCUMENT # p98000015352 1. Corporation Name HAWA COMMUNICATIONS, INC. Principal Place of Business Mailing Address 1225 HAVERHILL ROAD DO NOT WRITE IN THIS SPACE WEST PALM BEACH, FL 33417 3. Date Incorporated or Qualifed 2/16/98 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For Not Applicable 21 26 65-0915151 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes the current year Intangible 30 Personal Property Tax. □No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name 82 Street Address (P.O. Box Number is Not Acceptable) LEE HENDELSON 2835 CHYAHOGA LANE 83 WEST PALM BEACH, FL 33409 84 City 85 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. SIGNATURE IFF HENDELSON Slovators in pod of public dame of registered agent and title a applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13 TITLE DELETE 1.1 TITLE ☐ Addition ອດຄວດຂອຍຮອງຊຸ້ NAME 12 NAME CR2E034 ILONA MANDELBAUM -08/17/99--01056--012 STREET ADDRESS 1.3 STREET ADDRESS 1225 HAVERHILL ROAD *****70.00 *****70.00 1.4 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 334 70 TE ☐ Change Addition TITLE 21 TITLE NAME 2 2 NAME HENRY V MANDELBAUM STREET ADDRESS 2.3 STREET ADDRESS 4983 DRYDEN RD CITY-ST-ZIP 2 4 CITY-ST-ZIP WEST PALM BEACH, FL 334 LDOENTE ☐ Change ☐ Addition 31 TITLE TITLE VΡ 3.2 NAME HOMDATH MAHARAJ 3 3 STREET ADDRESS 947 SCOTT DR 3.4 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33415 TE 4.1 TITLE ☐ Addition TITLE NAME DST 4. 2 NAME DANIEL J. DOLAN 4.3 STREET ADDRESS STREET ADDRESS SARA GOMEZ DE FERRO 1225 HAVERHILL ROAD 4.4 CITY-ST-ZIP CITY-ST-ZIP 262 WORTH CT. SO. WEST PALM BEACH, FL 334ft Thange WEST PALM BEACH, FL 33405 DELETE Addition TITLE 51 TITLE 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 61 TITLE ☐ Change ☐ Addition 6.2 NAME

63 STREET ADORESS

6 4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

OTY-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 suppliemental 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 by 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, of the accuracy with all other like empowered.