

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

FILED  
May 08, 1999 8:00 am  
Secretary of State

05-08-1999 90063 033 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # P98000050051

1. Corporation Name  
HAZMIT, INC.

Principal Place of Business  
215 NORTH FEDERAL HIGHWAY  
SUITE F  
BOCA RATON FL 33307

Mailing Address  
215 NORTH FEDERAL HIGHWAY  
SUITE F  
BOCA RATON FL 33307

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1998

4. FEI Number

05-0841305

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

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

2. Principal Place of Business

21 1113 Green Pine Blvd

Suite, Apt. #, etc.

22 Apt. H-3

City & State

23 West Palm Beach, FL

Zip

24 33409

Country

25 U.S.A.

2a. Mailing Address

26 1113 Green Pine Blvd

Suite, Apt. #, etc.

27 Apt. H-3

City & State

28 West Palm Beach, FL

Zip

29 33409

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

Doris A. Mitchell

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

1113 Green Pine Blvd, Apt. H-3

83

84 City

West Palm Beach

FL

85 Zip Code

33409

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

Doris A. Mitchell, Doris A. Mitchell, President May 7, 1999

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
MITCHELL, DORIS A  
215 NORTH FEDERAL HIGHWAY  
BOCA RATON FL 33307

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
PSTD  
Mitchell, Doris A.  
1113 Green Pine Blvd, Apt. H-3  
West Palm Beach, FL 33409

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Doris A. Mitchell, Doris A. Mitchell, President May 7, 1999 961-338-8287

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)