

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

05-04-1999 90015 029 ***150.00
P98000099069

FILED

99 MAY 21 PM 4:39

STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 980000 99069 ✓

1. Corporation Name

Hammer Head Gear Inc.

Principal Place of Business

9229 Lakeworth Rd
Lake Worth, FL 33467

Mailing Address
Same

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified	4. FEI Number
November 11, 1998	
5. Certificate of Status Desired	6. Election Campaign Financing
<input type="checkbox"/>	<input type="checkbox"/>
\$8.75 Additional Fee Required	\$5.00 May Be Added to Fees
7. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

Wilson Larry McENERY
5821 Griffin Rd.
Dania, FL.

10. Name and Address of New Registered Agent

81 Name Linda R Griffith
82 Street Address (P.O. Box Number is Not Acceptable) 9229 Lakeworth Rd
83
84 City Lake worth FL 85 Zip Code 33467

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 Linda R Griffith Linda R Griffith DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
T/S	Joy Beth-Ann McENERY	Unknown		<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	15 CHANGE
M/T/S	Linda R. Griffith	9229 Lakeworth Rd	Lake Worth, FL. 33467	<input checked="" type="checkbox"/>
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	25 CHANGE
C/O	Kenneth R. Fountain	321 N.W. 44th St.	Pompano, FL.	<input checked="" type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	35 CHANGE
	Wilson Larry McENERY	5821 Griffin Rd	Dania, FL	<input checked="" type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	45 CHANGE
D-Advisor	Susan Crudup	6900 Victory Pkwy Dr. Apt. #	Tallahassee, FL 32301 N110	<input checked="" type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	55 CHANGE
				<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	65 CHANGE
				<input type="checkbox"/>

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

SIGNATURE: Kenneth R. Fountain 4/16/99 5208355