## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000021634

1. Entity Name

SIGNATURE:

May 01, 2000 8:00 am Secretary of State WHITE HAWK INDUSTRIES, INC. 02-09-2000 90379 039 \*\*\*150.00 Principal Place of Business Mailing Address 2475 S.E. DIXIE HIGHWAY in to S.E. DIXIE HIGHWAY - 11:au FL 34996 STUART FL 34996-4014 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Èee Required 6.-Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent HOCHSTEIN, ROBERT Street Address (P.O. Box Number is Not Acceptable) 3721 S.W. COQUINA WAY #106  $\infty$ PALM CITY FL 34990 PCB al 8. The above named entity pose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE gnature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9.2 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. (66/6)Vice President Presiden X Delete Addition TITLE NAMÉ Hochotein NAME 30165 therbor Point Dr CR2E034 37,215, W. Cayling Way # 106 STREET ADDRESS STREET ADDRESS CHY-ST-7IP Palm City, FI 34990 CITY-ST-ZIP 6 huart PL 34996 Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIE ☐ Change TITLE Delete TITE F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 secure this report as rendired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment address, with all other like empowered to the corporation.

**FILED**