


FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90113 016 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P02000014538*
 1. Entity Name
LTW INC



90020555

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4373 Northlake Blvd
 Suite, Apt. #, etc.

3. Mailing Address
4373 Northlake Blvd
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Palm Beach Gardens FL

City & State
Palm Beach Gardens FL

4. FEI Number
04-3603516

Applied For
 Not Applicable

Zip
33410 Country
PBC

Zip
33410 Country
PBC

5. Certificate of Status Desired - **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Martin V Delisi

Street Address (P.O. Box Number is Not Acceptable)
4361 Northlake Blvd

City
Palm Beach Gardens FL Zip Code
33410

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* *Martin V Delisi* *1/27/03*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
 After May 1 Fee is \$550.00
 Amended UBR is \$61.25
 Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Pres</i> <i>Amjad HAN DAN</i> <i>4373 Northlake Blvd</i> <i>Palm Beach Gardens FL 33410</i>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Amjad Han Dan* *2-1-03*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)