2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 08:00 AM
Secretary of State

DOCUMENT # 162239

1. Entity Name
MWI CORPORATION

Principal Place of Business	Mailing Address
33 NW 2ND STREET DEERFIELD BEACH FLA. 33441	201 N FEDERAL HWY DEERFIELD BCH., FL 33441 US

03172004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0613752
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ELLER, J. DAVID
201 N FEDERAL HWY
DEERFIELD BEACH, FL 33441

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

U00000096939
03/26/04-80018-007 158.75

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	ROEGIERS, THOMAS A.
STREET ADDRESS	201 N FEDERAL HWY
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	DP
NAME	ELLER, DAVID
STREET ADDRESS	201 N FEDERAL HWY
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	V
NAME	ELLER, DAREN J.
STREET ADDRESS	201 N FEDERAL HWY
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	DV
NAME	ELLER, DANA J.
STREET ADDRESS	201 N. FEDERAL HWY.
CITY-ST-ZIP	DEERFIELD BCH., FL 33441
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas A. Roegiers 03-17-2004 954-426-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #