2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 279682

Address:

City-St-Zip:

961 NW 185 TERR

PEMBROKE PINES, FL 33029

DON WORKS & COMPANY INC

FILED Feb 23, 2007 Secretary of State

Entity Nai	me: DON WC	IRKS & CC	DMPANY, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
4430 NE 8 FORT LAU	TH AVE. JDERDALE, FI	L 33334						
Current Mailing Address:				New Mailing Address:				
4430 NE 8 FORT LAU	TH AVE. JDERDALE, FI	L 33334						
FEI Number	: 59-1050144	FEI Numl	per Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
4430 NE 8 FORT LAU The above		L 33334	US s statement for the pu	urpose of changing i	ts registe	ered office or registered agent, or bot	:h,	
SIGNATUI	e of Florida. ⊃⊏:							
SIGNATOR		nic Signatu	re of Registered Age	nt		Date	_	
Election Car	mpaign Financin	g Trust Fund	d Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VP () MCCREARY, V 2712 OAK TRE OAKLAND PAR	E LANE)	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	PD () EWART, PETE 5070 INKWOO HOBE SOUND,	D WAY		Title: Name: Address: City-St-Zip:	100 INTE	(X) Change () Addition PETER M RACOASTAL PL #305 TA, FL 33469		
Title: Name:	VP () FOGEL, MICHA) Delete NEL W		Title: Name:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: PETER M EWART PD 02/23/2007