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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 461307

1. Corporation Name

CLW. INC.

FILED Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90024 020 ***150.00



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Principal Place of Business			3828 MANATEE AVENUE WEST			
3828 MANATEE AVENUE WEST Bradenton FL 34 20 5		BRADENTON FL 34205		DO NOT WRITE IN THIS SPACE		
والمراكب والمتابي			-,		3. Date Incorporated or Qualifed	
				•	09/18/1974	
2 Principal Blo	oon of Business	2a. Mailing Address	<u> </u>		4. FEI Number	Applied For
2. Principal Place of Business		26	— -		59-1548419	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
-		27	27		Bet to the Acce	· Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year	ır Intangible M∆Yes □No
24	25	29 3	0		Personal Property Tax. 10. Name and Address of New Registe	
	9. Name and Address of Curr		81	Name	10. Name and Address of New Adgrad	, da rigoni
	TO ALCOHOL: HEDDERT	į.	"			·
	EL (HORNE), HERBERT		82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
	14TH ST W		83		1.61 (1.61	
#324			63		(数方數接)配換數值數程數	
BRAL	DENTON FL 34205	,'	. 84	City	The state of the s	E 85 Zip Code
The second second second second	Same and the same	arrival as convert to the second			ention authorite this statement for the numos	sa of changing its registered
11. Pursuant l	to the provisions of Sections 607.0	0502 and 607:1508, Florida Statutes ate of Florida. Such change was aut	ne above horized by	the corporation	oration submits this statement for the purpos n's board of directors. I hereby accept the a	ppointment as registered
onice of it	egistered agent, or both, in the Su m familiar with, and accept the obl	ligations of Section 607.0505, Florid	ia Statutes.			
agent. i ar	III lailiniai with, tilla docopt till on	ingulation of the second		•		
CICNATURE					DAT	<u> </u>
SIGNATURE	Signature, typed or printed name of registered	agent and title If applicable. (NOTE: R	legistered Agen		I Wilett telliscating)	
SIGNATURE	Signature, typed or printed name of registered OFFICERS	agent and title If applicable. (NOTE: R			ADDITIONS/CHANGES TO OFFICER	
SIGNATURE 12.	Signature, typed or printed name of registered OFFICERS VST	agent and title If applicable. (NOTE: R	13.		I Wilett telliscating)	S AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered OFFICERS VST WILDER, JEANNINE	agent and title If applicable. (NOTE: R	13. 1.1 TITLE 1.2 NAME	t signature required	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered OFFICERS VST WILDER, JEANNINE 3907 10TH AVE DR W	agent and title If applicable. (NOTE: R	13. 1.1 TITLE 1.2 NAME 1.3 STREET	t signature required	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS VST WILDER, JEANNINE 3907 10TH AVE DR W BRADENTON FL	agent and title If applicable. (NOTE: R	13. 1.1 TITLE 1.2 NAME	t signature required	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered OFFICERS VST WILDER, JEANNINE 3907 10TH AVE DR W BRADENTON FL PD	agent and title if applicable. (NOTE: R AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	t signature required	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered OFFICERS VST WILDER, JEANNINE 3907 10TH AVE DR W BRADENTON FL PD HERBERT, HAZEL	agent and title if applicable. (NOTE: R AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-SI 2.1 TITLE 2.2 NAME	t signature required T ADORESS T- ZIP	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12 Change Addition
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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 if changed or on an attachment with an address, with all other layer expowered.