FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F96000005903 (7)

FWI 1, INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								
197 EIGHTH ST 197 EIGHTH ST								
BOSTON MA	02129	BOSTON MA 02129			DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified			
					11/13/1996			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		applied For	
21		26			13-3917811	⊢ —+	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.			_		Additional	
22	,	27			5. Certificate of Status Desired		Required	
City & State		City & State		Election Campaign Financing	Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country	•	8. This corporation owes or has paid the cu	rrent year Ir	ntangible	
24	25	29 3	10		Personal Property Tax due June 30.	Yes [□ No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
CC	PRPORATION SERVICE COMPANY	•	81	Name				
	01 HAYS STREET		82	Stroot A	Address (P.O. Box Number is Not Acceptable)			
	LLAHASSEE FL 32301-2525		"	Oll Cot 7	tidates (1.0. box Humbor is Not Nobopiasio)			
.,,			83					
			\ <u>.</u>			Tam 1 7:-	Carla	
			84	City	Fi	85 Zip	Code	
SIGNATURE	Signature, typed or protect name of repoterior in just OFFICERS AND	· - · · · · - · · · · · · · · · · · · ·	Hegistered Age	ent signature i	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
THILE	CP OFFICE 113 AND	DELETE	1.1 TITLE			Change	Addition	
NAME	CANNON, THOMAS J III		12 NAME	- 1	VST	X ,		
STREET ADDRESS	197 EIGHTH ST		13 STREET		Cannon, III, Thomas, J.			
CITY-ST: ZIP	BOSTON MA 02129		1.4 CITY - S		197 Eighth St			
TITLE	h	DELETE	21 TITLE	IL-EII	Boston, MA 02129	Change	Addition	
NAME			2.2 NAME	- 1				
STREET ADDRESS	197 EIGHTH ST		2.3 STREET	ADDRESS				
CITY+ST-ZIP	BOSTON MA 02129		2 4 CI1Y-					
TITLE	\$D				AST	Change	Addition	
NAME	MCINERNEY, MARTIN		3.2 NAME		AST Phillip McGovern, Esq.		Α	
STREET ADORESS	197 EIGHTH ST			ADDRESS	85 Livingston St.			
CITY-ST-ZIP	BOSTON MA 02129		3.4. CITY-		Roseland, NJ 07068			
TITLE	DOVIOR IN VEILS	DELETE	4.1 TITLE	21. FIL	VOSETUINA NO ALADO	Change	Addition	
NAME		hand was a re-	4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
			4.3 STREET	I				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	11-245		Change	Addition	
NAME			5.2 NAME	j				
			5.2 NAME 5.3 STREET	Anneree				
STREET ADDRESS			5.4 CITY-5					
CITY-ST-ZIP		DELETE	6.1 1ft Li	91 · ZIF		Change	Addition	
NAME		vice it	5.2 NAME	1		- 4:igo		
STREET ADDRESS			6.3 STREE	Annarce				
CITY-ST-ZIP			6 4 CITY-S	F-ZIF				

14. Thereby 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 innual 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 altachment with an address

SIGNATURE:

16/98

241-5900