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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000001141

PWF CORPORATION									 	1 2 11# 88 1#1 86 *111 1	IANAN HIC a r hiang a	HIRAR HAN KODA
Principal Place of Business Mailing Address									. I (kü lé dő réim jánán süréi műríti a	imili smill sartı a	1816) (1881 1991 I	11001 (101 100)
17701 COWAN . 17701 COWAN												
IRVINE CA 92614 IRVINE CA 92614									DO NOT WRITE IN THIS SPACE			
			-						3. Date Incorporated or Qualife	d		
									02/27/1998			
⊢	2. Principal Pla	ace of Busines	SS	<u></u>	2a. Mailing Address				4. FEI Number			plied For
2	<u> </u>	4 -4-		26 Suite Apt	Suite, Apt. #, etc.			33-0542490		\$8.75 A	t Applicable	
Suite, Apt. #, etc. Suite, Apt 22 27					. #, 0 10.	510.			5. Certificate of Status Desired	□ - ·	Fee Re	
City & State City & Sta					ie				6. Election Campaign Financing	, _U	\$5.00	May Be
2:	3			28				Trust Fund Contribution Added to Fees				
	Zip Country			Zip	— "		Country		8. This corporation owes the cu	rrent year Int		
24 25			29					Personal Property Tax. 10. Name and Address of New	Basistard		□No _	
_		9. Name ai	nd Address of Currer	it Registered Agei	nt	81	1 Name		IV. Name and Address of New	Registereu	Agent	
NATIONSCORP REGISTERED AGENTS, INC.												
526 EAST PARK AVENUE						82	2 Street	Addre	ss (P.O. Box Number is Not Accep	otable)		
TALLAHASSEE FL 32301						83	3					
										<u> </u>	85 Zip (
							84 City			FL	. `	
r	11. Pursuant t	to the provision	ns of Sections 607,050)2 and 607.1508, Fr	lorida Statute	es, the above	ve-named	corpo	ration submits this statement for th 's board of directors. I hereby acc	e purpose of	changing its	registered
	agent. I ar	n familiar with,	and accept the obligation	ations of, Section 60	07.0505, Flor	rida Statute	s.	0.000	to board or an odderer i mereby ase	optimo appar		
SIGNATURE (NOTE: E								enguired i	uthan rainstatum)	DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE 12. OFFICERS AND DIRECTORS					13.	Registered Agent signature required 13.		ADDITIONS/CHANGES TO C		ND DIRECTO	RS IN 12	
⊢	TITLE	PSD		ELETE		1.1 TITLE				_	☐ Change	Addition
	NAME I	AKERS, PA	UL B	•	•	1.2 NAME	:					
			7701 COWAN				: 1.3 STREET ADDRESS		`- =			
CITY-ST-ZIP IRVINE		IRVINE CA				1.4 CITY-ST-ZIP						
TITLE CD				☐ DELETE		2.1 TITLE					☐ Change	Addition
1 1		redding, i				2.2 NAME						
: :		17701 COV	VAN				2.3 STREET ADDRESS					
-	CITY-ST-ZIP			☐ DELETE			2.4 CITY-ST-ZIP				☐ Change	Addition
l	TITLE						3.2 NAME					
ì	STREET ADDRESS 18400 VON KARMAN			F 1000			3.3 STREET ADDRESS					
}	CITY-ST-ZIP IRVINE CA		INVENTION OF 100	. 1000		3.4. CITY-ST-ZIP						
⊢	TITLE	CD] DELETE	4.1 TITLE		1			☐ Change	☐ Addition
ı	NAME	0000000					4. 2 NAME					
ι.	STREET ADDRESS	28371 EL S				4.3 STREI	ET ADDRESS					
J	CITY-ST-ZIP	LAGUNA N				4.4 CFTY-	ST-ZIP					
TITLE		D		L.	DELETE	5.1 TITLÉ					☐ Change	☐ Addition
1	NAME	HOLDER, S	TEVEN			5.2 NAME						
;	STREET ADDRESS		LIE GAIL ROAD				ET ADDRESS			•		
⊢	CITY-ST-ZIP	LAGUNA H	ILLS CA		7 551 575	5.4 CITY-					Change	☐ Addition
ı	TITLE	D		L	DELETE	6.1 TTTLE 6.2 NAME					☐ Change	☐ Addition
	NAME	FLANAGAN				1	: FT AD/ORFSS					

LAGUNA NIGUEL CA 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 suppliemental annual reports 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 eceiver or fuster appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

OR DIRECTOR KICK RODDING. Chief GXP DISTINE