2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2006
Secretary of State

DOCUMENT# F98000006433

Entity Name: R W L 2, INC.

Current Principal Place of Business:

629 IDLEWYLD DRIVE
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

C/O STEVEN FULLER, CPA
100 W CYPRESS CREEK RD., SUITE 1045
FORT LAUDERDALE, FL 333092115

New Mailing Address:

P.O. BOX 7928
FORT LAUDERDALE, FL 33338

FEI Number: 65-0856412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOVERN, ROBERT W
629 IDLEWYLD DRIVE
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LOVERN, ROBERT W
Address: 629 IDLEWYLD DRIVE
City-St-Zip: FORT LAUDERDALE, FL

Title: TSD ( ) Delete
Name: LOVERN, SALLY
Address: 629 IDLEWYLD DRIVE
City-St-Zip: FORT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBERT W LOVERN PD 03/05/2006
Electronic Signature of Signing Officer or Director — Date