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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

(1)

T. H. W. ENTERPRISES, INC.

FILED Apr 27 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address											1 100(1)(0000 (((0) 0)(0) 0)(0) (((0) 1)0E) /	.,, 41811 8141	1 41611 614	/H UIU II	01011 10E1		
% TONEY H. WILSON % TONEY H. WILSON																	
7800 FRUITVILLE RD					7900 FRUITVILLE RD						DO NOT WRITE IN THIS SPACE						
SARASOTA FL 34240 SARASOTA FL 34240											3. Date Incorporated or Qualified				, Si AGE		
											"	04/25/1983					
2. Principal Place of Business 2a, Mailing Addre												FEI Number			TAD	plied For	
21					26						59-2292055					Applicable	
Suite, Apt. #, etc.					Suite, Apt. #, etc.						1_			\$8.		dditional	
22					27						5.	. Certificate of Status Desired				quired	
City & State					City & State						6.	Election Campaign Financing		\$5	.00	May Be	
23					28							Trust Fund Contribution				Fees	
Zip		L	Country		Z	ip .		Countr	y		8.	. This corporation owes or has pa	id the cu	rent ye	ar Inte	ngible	
24		25			29		30	<u> </u>			<u> </u>	Personal Property Tax due June		Yes		No	
		_	Address of Cur	rent Re	gister	red Agent					10.	Name and Address of New Re	gistered	Agent			
	LSON, TOI							B1		Name							
7900 FRUITVILLE ROAD								82 Street Ad			ddress (P.O. Box Number is Not Acceptable)						
SA	irasota f						<u> </u>	,									
								83	1								
								84	╂╴	City				85	Zip C	ode	
								İ	ı	•			FL		•		
11. Pursuant	to the provis	anois toor	of Sections 607.0	0502 an	d 607.	.1508, Florida Sta	stutes, t	he abov	e-I	named corpo	ratio	on submits this statement for the board of directors. I hereby acce	ourpose of	chang	ing its	registered	
agent. I a	ım familiar w	ith a	nd accept the ob	ligation	s of S	Section 607.0505,	Florida	Statute	S.	no corporanc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	board of directors. Thereby acce	pi ilio app	Ontario	11 65 1	eAistoi en	
SIGNATURE																	
-	Signature types	or pri	riled name of registered				NOTE Re		eni	algnature require			DATE				
12.	00		OFFICERS	AND DI	RECTO			13.	_			ADDITIONS/CHANGES TO OFFI	CERS AND				
TITLE	PD	1 4/	MEV II			☐ DELETE		1.1 TITLE						L Cha	.nge	☐ Addition	
NAME			ONEY H.				1	1.2 NAME									
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TITLE						LT DECEIE		2.1 TITLE						Cha	nge	Addition	
NAME								2.2 NAME									
STREET ADDRESS								2.3 STREE		1							
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TITLE NAME						- Decemb		3.1 TITLE						L Cha	nge	Addition	
· -								3.2 NAME									
STREET ADDRESS								3.3 STREET		1							
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NAME						المال المال		4.1 IFLE		1				UI6	go	Addition	
STREET ADDRESS								4.2 NAME)DBECC							
CITY-ST-ZIP																	
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NAME								5.2 NAME						0110			
STREET ADDRESS								5.3 STREET	r ar	nnerec							
CITY-ST-ZIP								5.4 CITY-S									
TITLE			******			☐ DELETE		6.1 TITLE	J1 * .	411				☐ Cha	006	Addition	
NAME								6.2 NAME		ŀ							
STREET ADDRESS								6.3 STREET	747	nnerss							
CITY-ST-ZIP								6.4 CITY-5		·							
14. I hereby c	certify that th	e infe	ormation supplied	with th	nis filine	g does not qualif	y for the	exemp	tio	n stated in S	ectio	on 119.07(3)(i), Florida Statutes. I	further ce	rtify the	t the i	nformation	
indicated	on this annu	ıal re	port or suppleme	ıntal anı	nual re	port is true and a	accurate	e and th	at	my signature	sha	all have the same legal effect as it by Chapter 607, Florida Statutes;	made un	der oatl	h: that	lam an	
Block 12	or Block 13	f cha	inged, or op an a	ittachme	ent witi	h an address.	IO BABO	uto IIIIS	•0	port as redal	ou L	by Grapter 607, Florida Statioles;		ny nam . →7	a ahb	Cals III	