SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 22, 1999 8:00 am Secretary of State

07-22-1999 90004 029 ***150.00

C & W ASSOCIATES, INC.

Principal Place	e of Business	Mailing Address				1 (##I#I #I## II)I# (#III #I### III	OL BILL DIGIL DIGIL DI	IN BIBAL BIBIL BIL	011 1801
2160 SUNNYDA		2160 SUNNYDALE							
CLEARWATER FL 34625		CLEARWATER FL 34625							
		•				DO NOT WRITE	IN THIS SPAC	Ε	
						3. Date Incorporated or Qualified 01/24/1985			_
2 Oringinal Di	long of Punings	2a. Mailing Address				4. FEI Number		Applied Fo	
2. Principal Pi 21 3659	lace of Business TAMPA RD					59-2590144		Not Applic	
21 3637 - Suite, Apt.		26 59716 Suite, Apt. #, etc.				<u> </u>	□ \$8	75 Addition	
_ ` `	·	27			ļ	5. Certificate of Status Desired	1 1 7	ee Required	
City & State	MAR FL	City & State				6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	.00 May B	
23	34/77	28				Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	Cou	ntrv		8. This corporation owes the currer			
24	25	29		W.		Intangible Personal Property.	Yes	□ 1√0	
	9. Name and Address of Current		100] .		L	10. Name and Address of New Re	gistered Agent		
				81 Nam	ne				
WAI	rner, robert			20		(2.0.2	t-\		
1010	0 FORREST CT			82 Stre	et Addres	ss (P.O. Box Number is Not Acceptab	ie)		
DUN	VEDIN FL 34698	,		83					
		· ·]
				84 City	,		FL 85	Zip Code	}
44 5	to the provisions of sections 607.0502				d same-a	tion submits this statement for the pur		ite regietere	
office or r	registered agent, or both, in the State o	of Florida, Such change was a	authorized	i by the co	orporation	's board of directors. I hereby accept	the appointment	as registered	ď
agent. I a	am familiar with, and accept the obligat	ions of, section 607.0505, Fl	orida Stat	utes.					ļ
SIGNATURE .			0*F. D				DATE		- 1.
	Signature, typed or printed name of registered agent OFFICERS AND		13.	red Agent sign	nature require	ad when reinstating) ADDITIONS/CHANGES TO OFFI		ECTORS IN	12
12.	P		1.1 TIT			ADDITIONO/OF INTOCO TO OFF			ddition COULCO
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CITY-ST-ZIP				Y-ST-ZIP					
14. I hereby ce indicated o	ertify that the information supplied with to on this annual report or supplemental a	his filing does not qualify for t	he exemp	tion stated hat my sid	d in sectio anature «	n 119.07(3)(i), Florida Statutes. I furth hall have the same legal effect as if o	er certify that the rade under oath:	information that I am	}
an officer o	or director of the corporation or the receiver Block 13 if changed, or on an attac	eiver or trustee empowered t	o execute	this repor	rt as requi	ired by Chapter 607, Florida Statutes	; and that my nai	ne appears	

SIGNATURE: _

July 14, 1999

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32320-1500

To Whom It May Concern:

I'm writing on behalf of two corporations that received a Second Notice for Annual Report Filing. Both corporations have common ownership and the same address. Neither corporation received the first request for filing.

We did move in 1998 and perhaps that contributed to the problem, although we've experienced no other mail or delivery problems.

Both Knight Dental Studio and C&W Associates do not have a history of slow pay as you can probably ascertain from our past history of filing on time.

I'm requesting the Division of Corporations waive the \$800.00 in penalties for late filing for these companies. This amount would create a hardship for us and we would be extremely grateful if you would honor this request.

Sincerely,

J.N. Dillashaw Controller