FILED 2008 FOR PROFIT CORPORATION ANNUAL REPORT Mar 03, 2008 08:00 A Secretary of State DOCUMENT # H63433 RWS INVESTMENTS, INC. Principal Place of Business Mailing Address P.O. BOX 5337 P.O. BOX 5337 ENGLEWOOD, FL 34224-5337 ENGLEWOOD, FL 34224-5337 01152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2559630 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPADE, ROBERT W DO NOT WRITE 6800 PLACIDA RD ENGLEWOOD, FL 34224 IN THIS SPACE

SIGNATURE							DATE		
	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00		ampaign Financing d Contribution.		\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS									
TITLE	PS						•		
NAME	SPADE, ROBERT								
STREET ADDRESS	P.O. BOX 5337						· •		

8. 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. I am familiar with, and accept

CITY-ST-ZIP ENGLEWOOD, FL 342245337 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

the obligations of registered agent.

U00000845872 03/18/08-80005-012 150.00

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-SI-ZIP

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

ICER OR DIRECTOR

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