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

DOCUMENT # J71091

IWA. INCORPORATED

FILED Jul 08, 1999 8:00 am Secretary of State

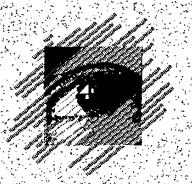
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407/629-0738

6-30-99

						(10) 61011 01911 81011 61611 91911 61811 1991	
Principal Place	of Business	Mailing Address					
400 N. WYMORI	E ROAD	400 N. WYMORE ROAD					
602 WYMORE R		602 WYMORE ROAD			DO NOT MARIE	DO MOT WINTER IN THIS ORAGE	
WINTER PARK (FL 32/89	WINTER PARK FL 32789 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
03		00			05/01/1987		
2 Principal Bl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
<u> </u>	_	26 PO Box 26	05		59-2793188	Not Applicable	
21 400 Suite, Apt.	N Wymore Road	Suite, Apt. #, etc.				\$8.75 Additional	
22	,, 0.00.	27		5. Certificate of Status Desired	Fee Required		
City & State)	City & State			6. Election Campaign Financing	\$5.00 May Be	
Winter Park FL		28 Winter Park FL		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	itry	8. This corporation owes the current	year	
24 32789	25 USA	29 32790-2685	30	USA	Intangible Personal Property.	Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	
DUO	OCI I BAIDIANA A			81 Name			
RUSSELL, MIRIAM A.				82 Street Address (P.O. Box Number is Not Acceptable)			
400 N. WYMORE ROAD			L				
AANA	TER PARK FL 32789		ĺ	83			
			ţ	84 City		85 Zip Code	
			i			FL The state	
11. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statutes of Florida, Such change was a	s, the about uthorized	ve-named corp by the corpora	poration submits this statement for the purp ation's board of directors. I hereby accept t	ose of changing its registered he appointment as registered	
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.							
SIGNATURE				 		DATE	
	Signature, typed or printed name of registered agent		TE: Registere	d Agent signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFICE		
12.	VST OFFICERS AND		1,1 TITI	F	ADDITIONS/CHANGES TO OFFIC		
TITLE		L DELETE	1.2 NA			Change Addition	
NAME	RUSSELL, MIRIAM A.		1				
STREET ADDRESS	5134 LAKE HOWELL ROAD.			EET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL		2,1 TIT	Y-ST-ZIP		Change Addition	
TITLE	PD MADTIN MILLADD E	L DELETE	2.1 III		•	Change Addition	
NAME	MARTIN, WILLARD F. 4934 HAITI CIRCLE		2	EET ADDRESS			
STREET ADORESS	ORLANDO FL						
CITY-ST-ZIP	V V		3.1 TIT	Y-ST-ZIP		Change Addition	
TITLE	MARTIN, VINETTA	L DELETE	3.2 NA			Change C Addition	
NAME	4934 HAITI CIRCLE			EET ADDRESS			
STREET ADDRESS	ORLANDO FL			1	•		
CITY-ST-ZIP	ORDANDOTE	C ACCUSE	4.1 TIT	Y-ST-ZIP		Change Addition	
TITLE		L DELETE	4.2 NA			Change Addition	
NAME				EET ADDRESS		1	
STREET ADDRESS				- 1		}	
CITY-ST-ZIP TITLE		D DELETE	5.1 TIT	Y-ST-ZIP		Change Addition	
ļ		DELETE	5.2 NA			Change C Addition	
NAME				ļ			
STREET ADORESS				EET ADDRESS		1	
CITY-ST-ZIP		□ DELETE	5.4 CIT	Y-ST-ZIP		Change Addition	
TITLE		DELETE	6.2 NA			Change L Addition	
NAME							
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP	ortify that the information supplied with	this filing does not qualify for th		Y-ST-ZIP ion stated in s	ection 119.07(3)(i), Florida Statutes, I furthe	er certify that the information	
14. I hereby certify that the information supplied with this filling 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 supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.							



IWA INCORPORATED

T71091 583359-90014-45

Corporate Headquarters 400 Wymóre Road • P.O. Box 2685 Winter Park, Florida 32790 Phone (407) 629-0738 • FAX (407) 629-0063

6-30-99

Division of Corporations Annual Reports Filings PO Box 1500 Tallahassee FL 32302-1500

Re: Document # J71091

Dear Sirs:

We are in receipt of your second notice for 1999 Profit Corporation Annual Report Packet indicating a filing fee of \$ 550.00.

Please be aware of the fact that the first notice was not received at our correct address namely 400 N Wymore Rd, Winter Park, FL 32789. A copy of our 1998 filing fee shows that we did indicate our correct address. The address 602 Wymore Rd has not been valid for a number of years and the building itself torn down. You will note that this second notice was addressed to both addresses but fortunately it did reach us.

In view of the foregoing we enclose our check 2734 in the amount of \$150.00. We respectfully ask that in view of the misaddressed first notice that this will be a correct and acceptable payment.

Thank you for your cooperation in this matter.

Sincerely,

IWA, Incorporated

Miriam A. Russell Executive Vice President

Enclosures: As noted.