FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DOCUMENT # J91463 (6)

1. Corporate Name
DPW INC.

Principal Place of Business
% PATRICIA P. WATKINS
33 ZAMORA ST
ST AUGUSTINE FL 32095-2924

Mailing Address
% PATRICIA P. WATKINS
33 ZAMORA ST
ST AUGUSTINE FL 32095-2924

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: 09/04/1987
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business
21 33 ZAMORA ST.
22 Suite, Apt. #, etc.
23 City & State: ST. AUGUSTINE FL
24 Zip: 32095
25 County: ST. JOHNS

2a. Mailing Address
26 33 ZAMORA ST
27 Suite, Apt. #, etc.
28 City & State: ST. AUGUSTINE FL
29 Zip: 32095
30 County: ST. JOHNS

4. FEI Number: 27-5407529
Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
WATKINS, PATRICIA P.
33 ZAMORA ST
ST AUGUSTINE FL 32084

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to Section [illegible] of the Corporation Code, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The registered office of this corporation is located at the following address:

12. OFFICERS AND DIRECTORS

Title	D
Name	WATKINS, DAVID H.
Street Address	33 ZAMORA ST
City, State, Zip	ST AUGUSTINE FL
Title	D
Name	WATKINS, PATRICIA P.
Street Address	33 ZAMORA ST
City, State, Zip	ST AUGUSTINE FL
Title	D
Name	WATKINS, JENNIFER P.
Street Address	33 ZAMORA ST
City, State, Zip	ST AUGUSTINE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title	D/O ☐ Change ☒ Add
Name	Jennifer J WATKINS
Street Address	1833 SHARON RD.
City, State, Zip	TALLAHASSEE, FL 32303

14. I hereby certify that the information supplied with this report is accurate and complete, to the extent required by Section [illegible] Florida Statutes. Further I certify that the information contained in the annual report or supplemental annual report is true and complete and that my signature shall serve the same as if I were to sign the report in the presence of a notary public. I am aware that false information submitted to a filing officer is a felony of the third degree, punishable by a fine of not more than $5,000 and imprisonment not to exceed five years.

SIGNATURE: David H. Watkins DAVID H. WATKINS 4-25-95 904 829 5153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0007307 CP