

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0000004

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED

98 AUG -5 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K38881 (4)

1. Corporation Name
R.W. SERVICES, INC.

Principal Place of Business 8305 FAIRWAY ROAD SUNRISE FL 33351 US	Mailing Address 8305 FAIRWAY ROAD SUNRISE FL 33351 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2134 Madeira Dr.	2a. Mailing Address 26 2134 Madeira Dr.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Weston FL	28 City & State Weston FL
24 Zip 33327	25 Country USA
29 Zip 33327	30 Country USA

3. Date Incorporated or Qualified 10/13/1988	
4. FEI Number 65-0078871	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**FRANKLIN, ROBERT M. P
3300 N UNIVERSITY DR, #604
CORPAL SPRINGS FL 33065**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WILKINS, ROBERT S., JR.	
STREET ADDRESS	1320 NW 83 TERR	
CITY-ST-ZIP	PLANTATION FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

000002610990--0
-08/07/98--01090--007
***150.00 Change ***150.00 Addition

B 98 APR 8/5 2099CS

14. I hereby certify that the information supplied with this filing 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.

SIGNATURE: **Robert S. Wilkins** 7-7-98 954 349-1071

CR2E034 (5/98)

FRANKLIN & NICHOLLS, C.P.A.'S, L.L.C.

CERTIFIED PUBLIC ACCOUNTANTS

3300 N. UNIVERSITY DRIVE, SUITE 604
CORAL SPRINGS, FLORIDA 33065
954 / 752-0082 Fax: 954 / 752-9163

ROBERT M. FRANKLIN, C.P.A., P.A.

GREGG E. NICHOLLS, C.P.A., P.A.

July 10, 1998

Florida Department of State
Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

RE: RW Services, Inc., FEI 65-0078871, Doc. #K38881

Dear Sirs:

Enclosed please find the 1998 Annual Report for the above-mentioned company. This report was mailed to an old address. Robert Wilkins, President of the Company, went through a divorce and changed addresses. His ex-wife received this report and held onto it. When he was able to get hold of it, he signed it and gave it to us to file for him. Enclosed is his check for \$150.00 the amount of the annual filing fee. Please waive the additional penalty for late filing due to the above circumstances.

If you have any questions, please feel free to contact me.

Sincerely yours,

Gregg Nicholls
Certified Public Accountant

FRANKLIN & NICHOLLS, C.P.A.'S, L.L.C.

CERTIFIED PUBLIC ACCOUNTANTS

3300 N. UNIVERSITY DRIVE, SUITE 604
CORAL SPRINGS, FLORIDA 33065
954 / 752-0082 Fax: 954 / 752-9163

ROBERT M. FRANKLIN, C.P.A., P.A.

GREGG E. NICHOLLS, C.P.A., P.A.

July 28, 1998

Florida Department of State
Division of Corporations
Annual Reports Filings
PO Box 6327
Tallahassee, FL 32302-1500

RE: RW Services, Inc., FEI 65-0078871, Doc. #K38881

Dear Sirs:

Enclosed please find the 1998 Annual Report for the above corporation, as well as their \$150.00 filing fee. Also enclosed is a copy of a letter submitted with the original filing explaining why the return was filed late. Please make note that this corporation has a previous history of never filing the Annual Report late. Please waive the late filing penalty and accept this report as being properly filed.

If you have any questions, please feel free to contact me.

Sincerely,



Gregg Nicholls
Certified Public Accountant