SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $378)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 11 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K63839** **(0)**

1. Corporation Name
D.W. CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
~~7695 S.W. 5TH ST.~~ ~~NORTH LAUDERDALE FL 33068~~	~~7695 S.W. 5TH ST.~~ ~~NORTH LAUDERDALE FL 33068~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/07/1989	3a. Date of Last Report: 08/02/1994
4. FEI Number: 65-0126120	☐ 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 XX Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 5612 PACIFIC BLVD	26 5612 PACIFIC BLVD
Suite, Apt. #, etc. 22 #715	Suite, Apt. #, etc. 27 #715
City & State 23 BOCA RATON FL	City & State 28 BOCA RATON FL
Zip 24 33433	Zip 29 33433
County 25 BROWARD	County 30 BROWARD

9. Name and Address of Current Registered Agent

WINTERS, DAVID
~~7695 S.W. 5TH ST.~~
~~NORTH LAUDERDALE FL 33068~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 5612 PACIFIC BLVD
83 #715
84 City: BOCA RATON **FL** 85 Zip Code: 33433

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: David Winters DAVID WINTERS (PRES.) 7-7-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	WINTERS, DAVID	1.2 NAME	WINTERS, DAVID
STREET ADDRESS	~~7695 SW 5TH ST.~~	1.3 STREET ADDRESS	5612 PACIFIC BLVD #715
CITY-ST-ZIP	~~N. LAUDERDALE FL~~	1.4 CITY-ST-ZIP	BOCA RATON FL
TITLE	~~V~~	2.1 TITLE	☐ Change ☐ Addition
NAME	~~WINTERS, KEVIN~~	2.2 NAME	
STREET ADDRESS	~~7695 SW 5TH ST.~~ DELETE	2.3 STREET ADDRESS	
CITY-ST-ZIP	~~N LAUDERDALE FL~~	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☒ Change ☐ Addition
NAME	MAHNKE, RICKY	3.2 NAME	V Mahnke, Ricky
STREET ADDRESS	~~1550 NE 38TH STREET~~	3.3 STREET ADDRESS	6060 N.W. 46 Ave.
CITY-ST-ZIP	~~OAKLAND PARK FL~~	3.4 CITY-ST-ZIP	TAMARAC, FL. 33319
TITLE	~~CT~~	4.1 TITLE	☐ Change ☐ Addition
NAME	~~WINTERS, CAROL~~	4.2 NAME	
STREET ADDRESS	~~7695 SW 5TH STREET~~ DELETE	4.3 STREET ADDRESS	
CITY-ST-ZIP	~~N LAUDERDALE FL~~	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: David Winters DAVID WINTERS (PRES.) 7-7-95 407-447-5891
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000863 CP