

**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000029008

**FILED  
Jul 14, 2004  
Secretary of State**

**Entity Name:** MAW INVESTMENTS, LLC

**Current Principal Place of Business:**

517 N.E. 14TH AVE.  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

517 N.E. 14TH AVE.  
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACCUPAY SERVICES CORP.  
4801 SO. UNIVERSITY DR.  
SUITE 3000  
DAVIE, FL 33328 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: WASILEWSKI, MICHAEL A  
Address: 517 N.E. 14TH AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33301

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL A.WASILEWSKI                      MGRM                      07/14/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date