2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81813

FILED Jan 06, 2004 Secretary of State

Entity Name: MCLWR INVESTMENTS, INC.

Jurrent P	rincipal Plac	e of Business:	New Principal Plac	e of Business:
95 MERRI SUITE 420 CORAL G		3134		
Surrent N	Mailing Addre	ess:	New Mailing Addre	ss:
95 MERRI SUITE 420 CORAL G		3134		
El Number	: 65-0203722	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent	: Name and Address	of New Registered Agent:
95 MERŔI SUITE 420		3134		
	e named entity e of Florida.	submits this statement for t	he purpose of changing its register	red office or registered agent, or both,
SIGNATU	RE:			
	Electro	onic Signature of Registered	Agent	Date
Election Ca	mpaign Financir	ng Trust Fund Contribution ().		
	mpaign Financir S AND DIREC		ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS
	S AND DIREC	CTORS:) Delete BERT J., DRE ST.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS () Change () Addition
OFFICER itle: lame: laddress:	S AND DIRECT D (MERLIN, ROB 5810 MAGGIC CORAL GABL	Delete BERT J., DRE ST. ES, FL) Delete N, E AVE	Title: Name: Address:	
DFFICER itle: lame: lddress: city-St-Zip: itle: lame: lddress:	D (MERLIN, ROB 5810 MAGGIC CORAL GABL D (LEVINE, IRWI 4293 PRAIRIE MIAMI BEACH	Delete SERT J., DRE ST. ES, FL) Delete N, E AVE I, FL) Delete K S., WAY	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition
DFFICER itle: lame: ddress: city-St-Zip: itle: lame: dddress: city-St-Zip: itle: lame: dddress:	S AND DIRECT D (MERLIN, ROB 5810 MAGGIO CORAL GABL D (LEVINE, IRWI 4293 PRAIRIE MIAMI BEACH D (COHEN, MARI 2525 SANDS N COOPER CIT	Delete Delete Delete Derete Derete Derete Derete Derete Delete	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. MERLIN D 01/06/2004