FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M14493

SIGNATURE: Y

FILED Jul 02, 2002 8:00 am Secretary of State 07-02-2002 90806 038 ***550.00

1. Entity Nam	ie						
0.S.W	., Inc.						
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DW-Walland Green	na and palke of a september of the confidence	ATTACAMENT OF SECURITIES	CONTRACTOR SERVICE	344731347467	118863	3	
	DO NOT WRIT	EINTHIS	SPACE				
2. Principal P	lace of Business	3. Mailing Address					
2. Principal Place of Business 1099 NE 18 Avenue			P.O. Box 901465				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
0: 40		67. 4 51-1-			4 FFI Ali:	Applied For	
City & State			City & State Homestead, FL		4. FEI Number 59-2523142	Applied For Not Applicable	
Homest Zip	Country		Country			\$8.75 Additional	
33033	ÜSA	^{Zip} 33090	USA	*	5. Certificate of Status Desired	Fee Required	
	ana sila kuma masa 1865.	والمرافقة المراسية في المالية		7.	Name and Address of Current Registered	I Agent	
			Na		Odom		
DO NOT WRITE			Sm	R.E. Odom Street Address (P.O. Box Number is Not Acceptable)			
Terrel Presentation Mainta			-	Street Address (P.O. Box Number is Not Acceptable) 1099 N.E. 18 Avenue			
	INTHIS	SPACE					
			Cit	,	FI	Zip Code	
				Homest		Zip Code 33033	
8. The above	named entity submits this stateme	ent for the purpose of changin	ng its registered off	ce or registered	agent, or both, in the State of Florida.	j	
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SIGNATURE .	Signature, typed or printed name of registered		(NOTE: Registered Agent	almost as as a local wh	en reinstating) DATE		
<u> </u>	Signature, typed or printed hame of registered				also de la constanta de la con		
9. This corporation is eligible to satisfy its Intangible After May			1 - May 1 Fee is May 1, Fee is \$5:	\$150,00 i0.00	10. Election Campaign Financing	\$5.00 May Be	
	requirement and elects to do so. ria on back)	Ame	nded UBR is \$6°	.25	Trust Fund Contribution.		
		- Make Creck F	ayable to Depart	ment of State			
11.		AND DIRECTORS	me				
TITLE NAMÉ	P R.E. Odom						
STREET ADDRESS				NAME: STREET ADDRESS			
CITY-ST-ZIP Homestead, FL 33033			1030215031519519	CITY.SI-TP.			
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Crty-St-ZIP			CITY-ST-21	In a roof and a second second			
13. I hereby o	certify that the information supplied	t with this filing does not quali	ify for the exemption	n stated in Secti	ion 119.07(3)(i), Florida Statutes. I further cer me legal effect as if made under oath; that I	tify that the information	
of the cor	rooration or the receiver or trustee	empowered to execute this	report as required	by Chapter 607.	Florida Statutes; and that my name appear	s in Block 11 or on an	
attachme	nt with an address, with all other lil	ke empowerea.		•			