2007 FOR PROFIT CORPORATION

FILED Mar 26, 2007 08:00 AM Secretary of State

| ANNUAL REPORT | | | | | | |
|--|-------------------------|--|--|--|--|--|
| DOCUMENT # P0000 1. Entity Name F W E INC. | | | | | | |
| Principal Place of Business | Mailing Address | | | | | |
| 8100 PARK BLVD | 7901 55TH WAY | | | | | |
| A 45 | PINELLAS PARK, FL 33781 | | | | | |
| PINELLAS PARK, FL 33781 | | | | | | |
| <u> </u> | | | | | | |



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) No Chg-P 03072007

Applied For 4. FEI Number 59-3656477 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHOTT, BILLY P 7001 66TH ST N PINELLAS PARK, FL 33781

DO NOT WRITE IN THIS SPACE

| | | | | • | | |
|---|---|--|--|--|--|--|
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agent and title | f applicable. (NOTE: Registered | Agent signaturi | a required when reinstating) | DATE | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | 000000677355 03/30/07-80100-014 150.00 | |
| 10. | OFFICERS AND DIRECT | CTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WHITE, FRANK 7901 55TH WAY PINELLAS PARK, FL 33781 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WHITE, SANDRA 7901 55TH WAY PINELLAS PARK, FL 33781 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V FERNANDEZ, BRIAN 10468 108TH ST LARGO, FL 33778 | | DO NOT WRITE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN THIS SPACE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 12. I hereby of indicated of the cor | certify that the information supplied with this is on this report or supplemental report is true a portation or the receiveror trustee empowers | ling does not qualify for the exe and accurate and that my signat d to execute this report as requir | imptions co ure shall ha red by Char | ntained in Chapter 119 ve the same legal effectore 607, Florida Statute | e. Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if | |

FRANK L WITE