

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90509 030 ***150.00

DOCUMENT # P00000064819

1. Entity Name

E.W.W. SERVICES INTERNATIONAL, INC.

Principal Place of Business

3857 GAINES DRIVE S.E.
 WINTER HAVEN FL 33884

Mailing Address

3857 GAINES DRIVE S.E.
 WINTER HAVEN FL 33884

2. Principal Place of Business

907 N. Wilson Ave.

3. Mailing Address

907 N. Wilson Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bartow, FL

City & State

Bartow, FL

4. FEI Number

59-3660108

Applied For

Not Applicable

Zip

Country

33830

USA

Zip

Country

33830

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WITMAN, EDGAR W
 3857 GAINES DRIVE S.E.
 WINTER HAVEN FL 33884

Name

Edgar W. Witman JR.

Street Address (P.O. Box Number is Not Acceptable)

3857 Gaines Drive

City

Winter Haven FL

Zip Code

33884

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.

SIGNATURE

Edgar W. Witman JR.

Edgar W. Witman JR.

2/16/01

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME President
 STREET ADDRESS Edgar W. Witman JR.
 CITY-ST-ZIP 3857 Gaines Drive
 Winter Haven, FL 33884

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME Vice President
 STREET ADDRESS Lori H Witman
 CITY-ST-ZIP 3857 Gaines Drive
 Winter Haven FL 33884

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edgar W. Witman JR.

2/16/01

Date

863-519-0800

Daytime Phone #

CR2E034 (10/00)