2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101597

Entity Name: A.W.M. CORPORATION

FILED Aug 09, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess.

9678 FONTAINEBLEU BLVD 286 NW 85 PLACE APT. 106 MIAMI, FL 33126

MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

9678 FONTAINEBLEU BLVD 286 NW 85 PLACE #106 MIAMI, FL 33126

MIAMI, FL 33172

FEI Number: 65-1150234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PAREDES, ARMANDO
9678 FONTAINEBLEU BLVD
APT. A06
MIAMI, FL 33172 US

PAREDES, ARMANDO
286 NW 85 PLACE
MIAMI, FL 33126 US

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: 08/09/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS () Delete Title: () Change () Addition

 Name:
 MORALES, WILLIAM
 Name:

 Address:
 9451 SW 6TH LANE
 Address:

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:

Title: VPT () Delete Title: VPT (X) Change () Addition

 Name:
 PAREDES, ARMANDO
 Name:
 PAREDES, ARMANDO

 Address:
 9678 FOUNTAINEBLEU BLVD #106
 Address:
 286 NW 85 PLACE

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ARMANDO PAREDES VP 08/09/2006