

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067344

FILED
Jul 07, 2009
Secretary of State

Entity Name: A.W. FUNDING & INVESTMENTS CORPORATION

Current Principal Place of Business:

6870 NW 173 DR
704
MIAMI, FL 33015

New Principal Place of Business:

20754 NW 41 AVE RD
MIAMI GARDENS, FL 33055

Current Mailing Address:

6870 NW 173 DR
704
MIAMI, FL 33015

New Mailing Address:

20754 NW 41 AVE RD
MIAMI GARDENS, FL 33055

FEI Number: 75-3107560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLON, WILMA
6870 NW 173 DR
704
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

COLON, WILMA
20754 NW 41 AVE RD
MIAMI GARDENS, FL 33055 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: WILMA COLON

07/07/2009

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:

Title: DPVS () Delete
Name: COLON, WILMA
Address: 6870 NW 173 DR #704
City-St-Zip: MIAMI, FL 33015

Title: T () Delete
Name: COLON, WILMA
Address: 6870 NW 173 DR # 704
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change () Addition
Name: COLON, WILMA
Address: 20754 NW 41 AVE RD
City-St-Zip: MIAMI GARDENS, FL 33055

Title: T (X) Change () Addition
Name: COLON, WILMA
Address: 20754 NW 41 AVE RD
City-St-Zip: MIAMI GARDENS, FL 33055

I hereby certify that the information supplied with this filing does not qualify 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: WILMA COLON

DPVS

07/07/2009

Electronic Signature of Signing Officer or Director

Date