


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
03 DEC 22 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000132472	
1. Entity Name PWER, INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5861 12th Avenue SW		3. Mailing Address 5861 12th Avenue SW	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Naples, FL 34116	City & State Naples, FL 34116	4. FEI Number 20-0478873	
Zip 34116	Country USA	Zip 34116	Country USA

REINSTATEMENT 03

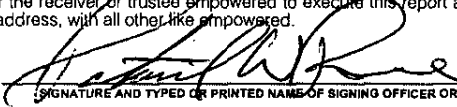
DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Rose Patrick	
	Street Address (P.O. Box Number is Not Acceptable) 5861 12th Avenue SW	
	City Naples FL Zip Code 34116	

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 	DATE 12/11/03

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	--

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Rose, Patrick W. 5861 12th Avenue SW Naples, FL 34116	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Rose, Erin L. 5861 12th Avenue SW Naples, FL 34116	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 10 or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	DATE 12/11/03 239-398-8480

CR2E034B (12/02)

**A BETTER
BUSINESS & TAX SERVICE, INC.**

**A ACCURATE
ACCOUNTING & TAX, INC.**



December 10, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 34302-1500

Re: PWER, INC.
Patrick W. Rose
944 Belville Blvd.
Naples, FL 34104

Please find attached the annual report for the year 2003 for the above mentioned client. Also enclosed is a check in the amount of \$150 to cover the annual filing fees.

The Corporation changed its mailing address and Mr. Rose never received the annual report for this year. Therefore, we request that any late fee for the year 2003 be waived.

Any further questions regarding this matter can be directed to me at this office Monday through Friday, between the hours of 11:00 A.M. and 5:00 P.M.

Sincerely,

Helen Watson
President

HW/jaa

Attachment