2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009158

Address: City-St-Zip:

TAMPA, FL 33625 FL

FILED Sep 06, 2005 Secretary of State

Entity Name: GW ENDEAVORS INC. **Current Principal Place of Business: New Principal Place of Business:** 6323 FROST DRIVE TAMPA, FL 33625 US **Current Mailing Address: New Mailing Address:** 6323 FROST DRIVE TAMPA, FL 33625 US FEI Number: 59-3779729 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: GARCIA, DAVID D SR GARCIA, JAMES L 6323 FROST DRIVE 6323 FROST DRIVE TAMPA, FL 33625 TAMPA, FL 33625 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: JAMES L GARCIA 09/06/2005 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: () Delete () Change () Addition GARCIA, DAVID D SR. Name: Name: 6323 FROST DRIVE Address: Address: City-St-Zip: TAMPA, FL 33625 US City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: WILKINS, MICHAEL J Name: 12702 TRUCIOUS PLACE Address: Address: TAMPA, FL 33625 US City-St-Zip: City-St-Zip: Title: Title: TRS () Delete () Change () Addition GARCIA, JAMES L Name: Name: 6323 FROST DRIVE Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: JAMES L GARCIA TRS 09/06/2005