

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160685

FILED
Mar 31, 2005
Secretary of State

Entity Name: A W GROUP INTERNATIONAL CORPORATION

Current Principal Place of Business:

4799 HOLLYWOOD BOULEVARD
HOLLYWOOD
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4799 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-2591698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STRIAR, MICHAEL P
3864 SHERIDAN STREET
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

ZAHR, ANGELICA
18801 COLLINS AVE
10
NORTH MIAMI BEACH, FL 33160 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: ANGELICA ZAHR

03/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZAHR, ANGELICA
Address: 4799 HOLLYWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: MITCHELL, WILLIAMS J
Address: 4799 HOLLYWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33021

Title: SECR (X) Delete
Name: MUNOZ, FEDORA P
Address: 4799 HOLLYWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33021

Title: TRES (X) Delete
Name: MITCHELL, WILLIAMS J
Address: 4799 HOLLYWOOD BOULEVARD
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZAHR, ANGELICA
Address: 18801 COLLINS AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VP (X) Change () Addition
Name: MUNOZ, FEDORA P
Address: 18801 COLLINS AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ANGELICA ZAHR

P

03/31/2005

Electronic Signature of Signing Officer or Director

Date