

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050004

Entity Name: CMW SALES & MARKETING, INC.

FILED  
Mar 05, 2008  
Secretary of State

## Current Principal Place of Business:

1496 S. MISSOURI AVENUE #114  
CLEARWATER, FL 33756

## New Principal Place of Business:

1548 S. MISSOURI AVENUE #114  
CLEARWATER, FL 33756

## Current Mailing Address:

1496 S. MISSOURI AVENUE #114  
CLEARWATER, FL 33756

## New Mailing Address:

1548 S. MISSOURI AVENUE #114  
CLEARWATER, FL 33756

FEI Number: 20-2651116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALET, CHARLOTTE  
1725 GOLF VIEW DRIVE  
BELLEAIR, FL 33756 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALET, CHARLOTTE  
Address: 1725 GOLF VIEW DRIVE  
City-St-Zip: BELLAIRE, FL 33756

Title: VPT ( ) Delete  
Name: WALET, CHARLOTTE  
Address: 1725 GOLF VIEW DRIVE  
City-St-Zip: BELLAIRE, FL 33756

Title: S ( ) Delete  
Name: WALET, CHARLOTTE  
Address: 1725 GOLF VIEW DRIVE  
City-St-Zip: BELLAIRE, FL 33756

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: CHARLOTTE WALET

S

03/05/2008

Electronic Signature of Signing Officer or Director

Date