

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098830

Entity Name: T M W ENTERPRISES, INC.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

22917 OLD INLET BRIDGE DRIVE
BOCA RATON, FL 33433

New Principal Place of Business:

18269 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498

Current Mailing Address:

22917 OLD INLET BRIDGE DRIVE
BOCA RATON, FL 33433

New Mailing Address:

18269 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498

FEI Number: 20-3153969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORKMAN, TODD M
22917 OLD INLET BRIDGE DRIVE
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

WORKMAN, TODD M
18269 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498 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: TODD M WORKMAN

01/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WORKMAN, TODD M
Address: 22917 OLD INLET BRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WORKMAN, TODD M
Address: 18269 CLEAR BROOK CIRCLE
City-St-Zip: BOCA RATON, FL 33498

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: TODD M WORKMAN

P

01/07/2008

Electronic Signature of Signing Officer or Director

Date