

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136866

Entity Name: TEW & LKW INC.

FILED  
Jul 03, 2006  
Secretary of State

## Current Principal Place of Business:

9411 CAVENDISH DR #105  
TAMPA, FL 33626

## New Principal Place of Business:

208 EAST BEARSS AVE  
TAMPA, FL 33613

## Current Mailing Address:

9411 CAVENDISH DR #105  
TAMPA, FL 33626

## New Mailing Address:

208 EAST BEARS AVE  
TAMPA, FL 33613

FEI Number: 20-3603815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, TIM  
9411 CAVENDISH DR #105  
TAMPA, FL 33626 US

## Name and Address of New Registered Agent:

WILLSON, TIM  
9411 CAVENDISH DR #105  
TAMPA, FL 33626 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: TIM WILLSON

07/03/2006

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:

Title: PSD ( ) Delete  
Name: WILLSON, TIM  
Address: 9411 CAVENDISH DR #105  
City-St-Zip: TAMPA, FL 33626

Title: VTD ( ) Delete  
Name: WILLSON, LINDA  
Address: 9411 CAVENDISH DR #105  
City-St-Zip: TAMPA, FL 33626

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTD (X) Change ( ) Addition  
Name: WILLSON, TIM  
Address: 9411 CAVENDISH DR #105  
City-St-Zip: TAMPA, FL 33626

I hereby certify that the information supplied with this filing does not qualify for the 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: TIM WILLSON

PSD

07/03/2006

Electronic Signature of Signing Officer or Director

Date