## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000128252

Title:

Name:

Address:

City-St-Zip:

( ) Delete

WEST PALM BEACH, FL 33401

801 SOUTH OLIVE AVENUE SUITE 107

SARGENT, NICKOLAS J

FILED Jul 09, 2007 Secretary of State

Entity Name: AWKWA CO.						
Current Principal Place of Business:				New Principal Place of Business:		
801 SOUTH OLIVE AVENUE SUITE 107 WEST PALM BEACH, FL 33401						
Current Mailing Address:				New Mailing Address:		
801 SOUTH OLIVE AVENUE SUITE 107 WEST PALM BEACH, FL 33401				801 SOUTH OLIVE AVENUE PO BOX 3044 PALM BEACH, FL 33480		
FEI Number:	20-5718676	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
FERREIRA, SEAN D 801SOUTH OLIVE AVENUE SUITE 107 WEST PALM BEACH, FL 33401 US				FERREIRA, SEAN D 801 S. OLIVE AVENUE SUITE 107 WEST PALM BEACH, FL 33401 US		
The above in the State		ıbmits this statement for the pu	ırpose o	f changing its registered	office or registered agent, or both,	
SIGNATURE: SEAN FERREIRA				07/09/2007		
Electronic Signature of Registered Agent					Date	
		2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive t	he prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E FERREIRA, SEAI PO BOX 3044 PALM BEACH, FI			Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SARGENT, TYLE 7675 STEEPLEC			Title: Name: Address: City-St-Zip:	()Change ()Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SEAN FERREIRA Ρ 07/09/2007

() Change () Addition