FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000037131 (7)

EWA INC

FILED May 12 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 1961 BONNIE CT. DUNEDIN FL 34698 DUNEDIN FL 34698-3206											
								3. Date Incorporated or Qualified 05/11/1994		ate of Last F 01/1996	leport
2. Principal	I Place of Bus	sinoss	2a.	Mailing Address			·	4. FEI Number	· I	A	oplied For
21			26	O la Ana H ata	,			59-3245700			ot Applicable
Suite, Apl. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired		,	Additional equired	
22 City & Si	itate		- 2/1	City & State				6. Election Campaign Financing	 -		May Be
23			28	ŕ				Trust Fund Contribution			to Fees
Zψ	Country			Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24		25	29		30	,			Yes		
		e and Address of Cu	urrent Regis	tered Agent		81	Name	10. Name and Address of New Re	gistered	Agent	
	SHCRAFT, F						Ivanie				
1961 BONNIE CT. Dunedin Fl. 34698						82	Street Ad	idress (P.O. Box Number is Not Acceptat	He)		
<i>.</i>	DIACORT (E	04000				83					·····
						84	City		FL	85 Zip	Code
agent SIGNATUR	Rf	ed or printed name of register		il applicable. (NC				orporation submits this statement for the pration's board of directors. I hereby acceptured when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE		<u></u>
TITLE	PST	OTTOLIN	STATE DIFFE	DELETE	1.1 Ti	TLE		WELL ODESIDENT		Change	Addition
NAME		AFT, F. WAYNE			1.2 N	AME	Ì	ESTELLA G. ASHCRAFT			
STREET ADDRES		ONNIE CT.			1.3 \$	TREET	ADDRESS	1961 BENNIE CT.			
CITY-ST-ZiF	DUNED	IN FL 34698			1.4.0	fTY-S	ST-ZIP	DUNEDIN FC. 34698			
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information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

MERCHARED W. ASHERAFT

813.73.1-8974 Daytime Phone #