

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90020 005 ***150.00

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02082005 Chg-P CR2E034 (10/03)

DOCUMENT # P94000063141 1. Entity Name R. & W. SALES AND SERVICES, INC.					
Principal Place of Business 300 GOLF VIEW RD. UNIT 302 N. PALM BCH., FL 33408 US			Mailing Address 300 GOLF VIEW RD. UNIT 302 N. PALM BCH., FL 33408 US		
2. Principal Place of Business 5944 Coral Ridge Drive Suite, Apt. #, etc.		3. Mailing Address 5944 Coral Ridge Dr. Suite, Apt. #, etc.			
City & State Coral Springs, FL.		City & State Coral Springs, FL.		4. FEI Number 65-0512731	
Zip 33076		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DAWLEY, RONALD E 300 GOLF VIEW RD. N. PALM BCH., FL 33408			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5944 Coral Ridge Drive City Coral Springs FL Zip Code 33076		
8. 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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE <u><i>RONALD E DAWLEY</i></u> <u><i>2-14-05</i></u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAWLEY, RONALD E. 300 GOLF VIEW RD., UNIT 302 N. PALM BCH., FL 33408	<input type="checkbox"/> Delete			
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12. I hereby certify that the information 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Ronald E. Dawley</i></u> <u><i>2/14/05</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					