

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065135

FILED  
Feb 14, 2007  
Secretary of State

Entity Name: TAW MIAMI SERVICE CENTER, INC.

## Current Principal Place of Business:

9930 NW 89TH AVE  
MIAMI, FL 33178 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 3381  
TAMPA, FL 33601 US

## New Mailing Address:

FEI Number: 65-0516082      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TURNER, JAMES A III  
440 SOUTH 78TH STREET  
TAMPA, FL 33619 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DC ( ) Delete  
Name: TURNER, J. ARTHUR III  
Address: 440 S. 78TH STREET  
City-St-Zip: TAMPA, FL 33619 US

Title: TRES ( ) Delete  
Name: MACINNES, MICHAEL M  
Address: 440 SOUTH 78TH STREET  
City-St-Zip: TAMPA, FL 33619 US

Title: SECR ( ) Delete  
Name: MACINNES, MICHAEL M  
Address: 440 SOUTH 78TH STREET  
City-St-Zip: TAMPA, FL 33619

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JAMES A. TURNER, III

COB

02/14/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date