

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Norman Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000067237 (5)		PROVED AND FILED MAY - 1 PM 3:29 TALLAHASSEE, FLORIDA	
1. Corporation Name RDW ENTERPRISES, INC.			
Principal Place of Business 735 AMBERTON CLOSE SUWANEE GA 30174		Mailing Address 735 AMBERTON CLOSE SUWANEE GA 30174	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	
3. Date Incorporated or Qualified 09/06/1994		3a. Date of Last Report 09/06/1994	
4. FEI Number 650520356		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent WASKOM, JOHN J 2033 MAIN STREET, SUITE 600 SARASOTA FL 34237		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WASKOM, JOHN J 2033 MAIN STREET, #600 SARASOTA FL 34237	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WASKOM, RICHARD 735 AMBERTON CLOSE SUWANEE GA 30174	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	900001490553 -05/17/95 --01041 --024 ****225.00 ****225.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WASKOM, KATHY 735 AMBERTON CLOSE SUWANEE GA 30174	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☒ Change ☐ Addition WASKOM, CATHY
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☒ Addition DIRECTOR, TINA - K. DONAVAN WASKOM 5697 JOLLIE DRIVE FREDERICK, MD 21702
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☒ Addition DIRECTOR MARJORIE WASKOM 5697 JOLLIE DRIVE FREDERICK, MD 21702
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition JOA 5-1-95
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: X K. Donovan Waskom SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR K. DONAVAN WASKOM TRES.		X 5.895 Date 301-473-4230 FAX 301-473-9187	