2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 25, 2007 08:00 A Secretary of State

DOCUM	MENT # P940000842	201

Entity Name
 AW HOLDINGS, INC.



Principal Place of Business

1255 S. MILITARY TRAIL SUITE 200

DEERFIELD BEACH, FL 33442 US

Mailing Address

1255 S. MILITARY TRAIL SUITE 200

DEERFIELD BEACH, FL 33442

US



03292007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0582985 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

954-426-2600

Daytime Phone #

6. Name and Address of Current Registered Agent

WALDMAN, ANDREW C 1255 S. MILITARY TRAIL SUITE 200 DEERFIELD BEACH, FL 33442

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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									
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan- Trust Fund Contribution.		ing	\$5.00 May Be Added to Fees	000000730077 05/08/07-80061-021	158.75				
10.	OFFICERS AND DIREC								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS WALDMAN, ANDREW C 1255 S. MILITARY TRAIL, SUITE 200 DEERFIELD BEACH, FL 33442			•					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WALDMAN, ANA MARIA 1255 S. MILITARY TRAIL, SUITE 200 DEERFIELD BEACH, FL 33442		-		•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
NAME. STREET ADDRESS CITY-ST-ZIP				3 F					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.									