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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000066188 1. Corporation Name

MXW CORP.

SEURE LARY OF STATE

FILED

99 JAN 14 PM 3: 03

Fillicipal Flac	e Ot Daniese	Manning Address	•		1		
2400 E. COMMERCIAL BLVD. 2400 E. COMMERCIAL BLVD.			,				
SUITE 810 SUITE 810			_				
FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308					DO NOT WRITE IN THIS SPACE		
]					3. Date Incorporated or Qualifed		
	W				08/25/1995		
_	flace of Business	2a. Mailing Address			4. FEI Number Applied For		
21		26			65-0617186 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	=:-	-	5. Certificate of Status Desired  \$8.75 Additional		
22		27			5. Certificate of Status Desired Fee Required		
City & Stat	te.	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	· — · — · — =			′	8. This corporation owes the current year Intangible		
24	24 25 29 30				Personal Property Tax. XYes \( \square\) No		
	<ol><li>Name and Address of Current</li></ol>	Registered Agent			10. Name and Address of New Registered Agent		
150	11577 4 14791114240		81	Na	Name		
f	HAEL A. WILLIAMS		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	N.E. 58TH STREET		"	oz ozet Address (1.0. box Natitoel is Not Acceptable)			
	TE 105		83				
FT. I	LAUDERDALE FL 33308		<u> </u>	L.,			
			84	Ci	City S5 Zip Code		
44 Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above	e-nar			
office or r	egistered agent, or both, in the State of	f Florida. Such change was auti	orized by	the	named corporation submits this statement for the purpose of changing its registered ne corporation's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Fload	a Statutes		<b>-</b> -		
SIGNATURE			=				
	Stgnature, typed or printed name of registered agent OFFICERS AND			it signi	signature required when reinstating)  DATE  ACCUTACION OF TO OFFICE TO SERVICE TO SERVIC		
12.	DP OPPICERS AND	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
					Griding Cartonian		
NAME	WILLIAMS, MICHAEL A	LUTE ALS	1.2 NAME	•	·		
STREET ADORESS	2400 E. COMMERCIAL BLVD., S	UHE 810	1.3 STREET				
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition		
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDF	DDRESS		
CITY-ST-ZIP			2.4 CITY-S	T-ZIP	ZIP		
TITLE		☐ DELETE	3.1 TITLE		. Change Addition		
NAME			3.2 NAME		_ 700000740007 -		
STREET ADDRESS			3.3 STREET	ADDE	7000027492670 -01/21/9901038011		
CITY-ST-ZIP			3.4. CITY- S		2P ****150.00 ****150.00		
TITLE	****	☐ DELETE	4.1 TITLE	1-40,	Change Addition		
NAME			4.1 NAME				
i			4.2 NAME 4.3 STREET	. ADOU	DDBESS		
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST	r-ZiP	☐ Change ☐ Addition		
TIBLE		□ DELETE	5.1 TITLE		[] Change [] Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP			5.4 CITY-\$1	1-21P	· · · · · · · · · · · · · · · · · · ·		
TTILE	-	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME		1-11 11000		
STREET ADDRESS			6,3 STREET	ADDR	DORESS 12 1111/20 494HZ		
			6.4 CITY-ST	-ZIP			
CITY-ST-ZIP			0.1011, 0.				

necess certain that the mornitation supplied with this litting does not quality for the exemption stated in Section 119.07(3)(1), Fighida Statutes. I further certify that the informatic indicated on this annual report or suppliemental 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 on the receiver or trusted 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 or an attachment with properties, with all other like empowered.

SIGNATURE:

954-771-9660