PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000091314

1. Corporation Name

A&W TECHNICAL SERVICES, INC.

Principal Place	e of Business	Mailing Address				E(1) 8 81H 8 9H 18 H		11011 0101 1001
7641 HOOPER ROAD 7641 HOOPER ROAD								
SUITE 3 SUITE 3					DO NOT WRITE IN THIS SPACE			
WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
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		V 10 A I I			11/06/1996 4. FEI Number		1 1 4 5	plied For
2. Principal Place of Business 2a. Mailing Address				" 		'		
21		26			00-07 13407		\$8.75	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Fee Re	
City & State	e	City & State			6. Election Campaign Financing	П	\$5.00	
23		28			Trust Fund Contribution		Added 1	to Fees
Zip	Country	Zip	Country		8. This corporation owes the curr			п.,
24	25	29 30	0		Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New F	Registered A	gent	
NA/INM	SIOW CRECORY S		81	Name				
WINSLOW, GREGORY S 7641 HOOPER ROAD			82	Street Addre	ess (P.O. Box Number is Not Accepta	able)		
SUIT			83					_
WES	T PALM BEACH FL 33411		84	City			85 Zip (Code
			1	•		_ <u></u>	<u> </u>	
44 Dismissions	to the provisions of Sections 607 0502			amed corne				
l office or r	egistered agent, or both, in the State om familiar with, and accept the obligati	if Florida. Such change was auti	nonzea ov to	e corporation	oration submits this statement for the n's board of directors. I hereby accept	pt the appoint	ment as re	gistered
l office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was autrons of, Section 607.0505, Florid	a Statutes.	e corporation	n's board of directors. Thereby accep	pt the appoint	ment as re	gistered
office or re agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati Signature, typed or printed name of registered agent	ons of, Section 607.0505, Florid and title if applicable. (NOTE: R	a Statutes.	e corporation	n's poard of directors, i neleby acceptions when reinstating)	DATE		gistered
office or reagent. I as	egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 607.0505, Florid and title if applicable. (NOTE: R	a Statutes.	e corporation	n's board of directors. Thereby accep	DATE		gistered
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office or nagent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of mamiliar with, and accept the obligation of signature, typed or printed name of registered agent OFFICERS AND DISTRIBUTION, GREGORY S 130 BILBAO STREET	ons of, Section 607.0505, Florid and title if applicable. (NOTE: R D DIRECTORS	a Statutes. a Statutes. a Statutes. a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET AG	gnature required	n's poard of directors, i neleby acceptions when reinstating)	DATE	DIRECTO	DRS IN 12
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CITY-ST-ZIP 14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

561-691-0059

☐ Change

☐ Addition

May 11, 1999 8:00 am Secretary of State

05-11-1999 90024 018 ***150.00