## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

**FILED** 

Aug 28 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9700000021 (0) C & W INDUSTRIES, INC.								
Principal Place of Business Mailing Address								
151 CRANDON BLVD 151 CRANDON BLVD								
#328 #328						DO NOT HIDITE IN THIS ODDOG		
KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33			49			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report		
						i ' i i		
2. Principal P	pal Place of Business 2a. Mailing Address					12/17/1996 4. FEI Number Applied For		
21	26					650728510 Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #						5 Certificate of Status Desired S8.75 Additional		
27						Fee Required		
City & State City & State						6. Election Campaign Financing \$5.00 May Be		
<b>23</b> Zip	Country	<b>28</b> Zip	T Co.	untry		Trust Fund Contribution		
24	Country 25	2.9	30	or ili y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 😿 No		
[24]	9. Name and Address of Curren		[30]	Ţ		10. Name and Address of New Registered Agent		
AR	NOLD, WENDALL			81	Name	0		
151 CRANDON BLVD				82	Street	et Address (P.O. Box Number is Not Acceptable)		
#328				Ĺ	Circoir	Thousand (1.5. Box Hombor to Hot Coopeanly		
KEY	Y BISCAYNE FL 33149			83				
				84 City		85 Zip Code		
					l	<b>        -</b>		
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, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered age	rd and life if applicable (N	OTE: Registere	ed Age	ent signature	ure required when reinstating) DATE		
12.		OFFICERS AND DIRECTORS 1:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	111	1 1 TITLE		Change Addition		
NAME	ARNOLD, WENDALL			1.2 NAME				
STREET ADDRESS 151 CRANDON BLVD, # 328			1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	KEY BISCAYNE FL 33149			1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition		
NAME		L DELETE	1	2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP					
TITLE	71.7	DELETE		3.1 TITLE		☐ Change ☐ Addition		
NAME			3.2 N	NAME				
STREET ADDRESS			3.3 \$	STREET	ADDRESS	;		
CITY-ST-ZIP				3 4. CITY - ST - ZIP				
TITLE				4.1 TITLE		☐ Change ☐ Addition		
NAME				NAME		!		
STREET ADDRESS					ADDRESS	•		
			4.4 C 5.1 T	DITY-S	I - ZIP	Change Addition		
NAME		المارين المارين		NAME		Villago Li rubillon		
STREET ADDRESS			1		ADDRESS	3		
CITY-ST-ZIP			- 1	CITY-S				
TITLE		☐ DELETE	6.1 T			Change Addition		
NAME			6.2 N	NAME				
STREET ADDRESS			6.3 \$	STREET	ADDRESS	;		
CITY-ST-ZIP			6.4 C	DITY-S	IT-ZIP			

14. I do 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.