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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000010290 (9)

LWW, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 376 NORTH ATLANTIC AVENUE 376 NORTH ATLANTIC AVENUE COCOA BEACH FL 32931 COCOA BEACH FL 32931 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/31/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3429630 21 Not Applicable 26 Suite, Apt. #, etc Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RANEW, ROBERT 376 NORTH ATLANTIC AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) COCOA BEACH FL 32931 City Zip Code 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, or 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 account the objections of Special 607.0505. Florida Statutes ROBERT RANEW 4-21-98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1.1 TITLE NAME 1.2 NAME RANEW, ROBERT STREET ADDRESS **376 NORTH ATLANTIC AVENUE** 1.3 STREET ADDRESS COCOA BEACH FL 32931 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2 1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TINE Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DELETE Change TITLE 4.1 1111.8 Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DFLETE Change Addition TITLE 61111LE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 offect 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 all address.