


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000087304</b> 1. Entity Name MDTW, INC.	
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Principal Place of Business 14975 TECHNOLOGY COURT FORT MYERS, FL 33912	Mailing Address 14975 TECHNOLOGY COURT FORT MYERS, FL 33912
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**DO NOT WRITE IN THIS SPACE**



03222004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0798178	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  WU, WEN JONG 6241 METRO PLANTATION ROAD FORT MYERS, FL 33912
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KIANG-WU, MAYLENE 13633 BRYNWOOD LANE FT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WU, KUEI YING 9915 VANILLALEAF STREET FT MYERS, FL 33919
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000000098345  
03/29/04-80036-016 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

**SIGNATURE:**  **U. P 3/23/04**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #