

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90025 035 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																									
DOCUMENT # P98000040798																											
1. Corporation Name RLW ENTERPRISES, INC.																											
Principal Place of Business 7650 SW CONNERS HWY OKEECHOBEE FL 34974		Mailing Address 7650 SW CONNERS HWY OKEECHOBEE FL 34974																									
DO NOT WRITE IN THIS SPACE																											
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		3. Date Incorporated or Qualified 05/05/1998 4. FEL Number 59-2119248 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees 7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No																									
2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		8. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code																									
9. Name and Address of Current Registered Agent WARD, ROBERT L 7650 SW CONNERS HWY OKEECHOBEE FL 34974		10. Name and Address of New Registered Agent																									
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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: <i>Robert L. Ward</i> DATE: 3-16-99																											
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																									
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 in an attachment with an address, who is otherwise empowered.

SIGNATURE:

Robert L. Ward
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT L. WARD

Date

Daytime Phone