Aug 12, 1999 8:00 am Secretary of State

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000055909

1. Corporation Name

RWL SERVICES, INC.

Principal Place	e of Business			Maitir	Mailing Address									
235 SOUTH HIBISCUS DRIVE MIAMI BEACH FL 33139				235 SOUTH HIBISCUS DRIVE MIAMI BEACH FL 33139						DO NOT WRI	TE IN THIS	SPACE		
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2				720 14	-ilia - A delegas						El Number			pplied For
2. Principal P	lace of Busine	2a. Mailing Address						₩. Γ	65-085132 <u>7</u>	,	1	ot Applicable		
21]				26							1002 124 1			Additional
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5	5 . C	Certifcate of Status Desired			equired	
22		~	City & State					_				<u> </u>		
City & State	e 🚓		City & State				1 6		Election Campaign Financing		•	May Be to Fees		
23	· · · · · · · · · · · · · · · · · · ·		Zip Country						rust Fund Contribution			to rees		
Zip	Country			<u></u>			, , , , , , , , , , , , , , , , , , , ,				his corporation owes the cur	rent year in	rangible ☐ Yes	₽No
24		25		29		30	1		10		Personal Property Tax. Name and Address of New I	Panietarad		
	9. Name a	and Add	iress of Current	Register	ed Agent		81	Name		0.	varile and Address of New	Registereu	Agent	_
I EV	IS, ROBERT						101	Name	•					
						Street	reet Address (P.O. Box Number is Not Acceptable)							
235 SOUTH HIBISCUS DRIVE MIAMI BEACH FL 33139														
MIAI	WI BEAUTI F	E 3313	ş				83							
							84	City					85 Zip	Code
	٠.	-										FL		
office or r	registered age	ent, or bo	ith, in the State o	of Florida.	1508, Florida Sta Such change was ection 607.0505, F	s autnorize	a by	tne corp	d corporation's t	tion s boa	submits this statement for the rd of directors. I hereby acce	pt the appo	cnanging it intment as re	s registered egistered
SIGNATURE			***************************************		-Ek(- (A)C	OTE: Registere	d Agen	t nionaturo	required taken	on rein	setating)	DATE		
12.	Signature, typed t	or printed na	of registered agent					it signature	Tedaner wite		ODITIONS/CHANGES TO OF		ND DIRECT	ORS 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)(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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

July 31, 1999

Division of Corporations
Annual Reports Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

I apologize for the late payment of my annual report fee. I have been traveling abroad, and I am the only officer of the company authorized to sign the enclosed document.

If you have any questions, please don't hesitate to contact me at 954-525-6840 (office); 305-531-2268 (home), or 954-609-1306 (cellular).

Sincerely,

Robert W. Levis

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RWL/nat_

Enclosure