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Mar 24 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S18227 (6)

1. Corporation Name
A W D, INC.



Principal Place of Business: 4706A SE 11TH PLACE SUITE 101 CAPE CORAL FL 33904
Mailing Address: 4706A SE 11TH PLACE SUITE 101 CAPE CORAL FL 33904
8106 US 41 N Box 115 NAPLES, FL 34103

2. Principal Place of Business (21-24) and 3a. Date of Last Report (3a) 03/08/1996. 4. FEI Number 65-0266468. 5. Certificate of Status Desired \$8.75 Additional Fee Required. 6. Election Campaign Financing \$5.00 May Be Added to Fees. 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [] No.

9. Name and Address of Current Registered Agent: SCHUCHTER, JOSEPH 4706A SE 11TH PL STE 101 CAPE CORAL FL 33904. 10. Name and Address of New Registered Agent: JOSEPH J. SCHUCHTER 3106 US. 41 N. BX 115 NAPLES, FL. 34103. 81-85 fields for name, address, city, and 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, 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: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE:

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for title, name, street address, city, state, and zip code for multiple individuals.

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.

SIGNATURE: [Signature] 3-18-97 2615139
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Election Period #)

CR2E034 (9/96)