

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000038046

**Entity Name:** MR. TW, INC.

**Current Principal Place of Business:**

5226 CENTER ST  
WIMAUMA, FL 33598

**Current Mailing Address:**

P.O. BOX 618  
WIMAUMA, FL 33598

**FEI Number:** 20-4436101

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARROYO, ABRAHAM  
5226 CENTER ST  
WIMAUMA, FL 33598 US

*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.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPT  
Name ARROYO, ABRAHAM  
Address 5226 CENTER ST  
City-State-Zip: WIMAUMA FL 33598

Title DVS  
Name ARROYO, CHRISTIN V  
Address 5226 CENTER ST  
City-State-Zip: WIMAUMA FL 33598

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ABRAHAM ARROYO

DPT

06/29/2020

Electronic Signature of Signing Officer/Director Detail

Date