2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740136

Entity Name: JIWA, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

420-422-424 S. B STREET LAKE WORTH, FL 33460

Current Mailing Address: New Mailing Address:

420 S. B STREET APT. A-2 LAKE WORTH, FL 33460

FEI Number: 59-1843029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMYTH, LINDA 1571 SW CROSSING CIRCLE PALM CITY, FL 34990 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition

 Name:
 SMYTH, LINDA C
 Name:
 NEILSON, ERIC

 Address:
 1571 SW CROSSING CIRCLE
 Address:
 420 S B ST

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: LAKE WORTH, FL 33460

Title: TS () Delete Title: () Change () Addition

 Name:
 STATON, BARBARA
 Name:

 Address:
 420 SOUTH B STREET APT. A-2
 Address:

 City-St-Zip:
 LAKE WORTH,, FL 33460
 City-St-Zip:

Title: D () Delete Title: P (X) Change () Addition

Name: ERIC, SMITH Name: ERIK, SMITH

 Address:
 420 SOUTH B STREET APT. A-1
 Address:
 420 SOUTH B STREET APT. A-1

 City-St-Zip:
 LAKE WORTH, FL 33460
 City-St-Zip:
 LAKE WORTH, FL 33460

Title: D () Delete Title: D (X) Change () Addition Name: EDMAN, JAMES Name: RIMPOTTI, STEPHANIE Address: 422 S. B STREET APT. B-2 Address: 422 S. B STREET APT. B-2

 Address:
 422 S. B STREET APT. B-2
 Address:
 422 S. B STREET APT. B-2

 City-St-Zip:
 LAKE WORTH, FL
 City-St-Zip:
 LAKE WORTH, FL
 33460

Title: D () Delete Title: () Change () Addition

 Name:
 MILNE, SYVI K
 Name:

 Address:
 420 S.B. STREET A3
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33460
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIK SMITH PRES 04/30/2008