

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740136

Entity Name: JIWA, INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

420 S. B STREET
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:

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

Name and Address of New Registered Agent:

SMITH, ERIK
4280 WHITE FEATHER TRAIL
BOYNTON BEACH, FL 33436 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: ERIK J. SMITH

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: NEILSON, ERIC
Address: 420 S B ST
City-St-Zip: LAKE WORTH, FL 33460

Title: TS () Delete
Name: STATON, BARBARA
Address: 420 SOUTH B STREET APT. A-2
City-St-Zip: LAKE WORTH,, FL 33460

Title: P () Delete
Name: ERIK, SMITH
Address: 420 SOUTH B STREET APT. A-1
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: RIMPOTTI, STEPHANIE
Address: 422 S. B STREET APT. B-2
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: MILNE, SYVI K
Address: 420 S.B. STREET A3
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 J. SMITH

P

04/10/2009

Electronic Signature of Signing Officer or Director

Date