


2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED AND FILED

06 JAN 19 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000001962
1. Entity Name
JWIN ELECTRONICS CORP.



Principal Place of Business
2 HARBOR PARK DR.
PORT WASHINGTON, NY 11050

Mailing Address
2 HARBOR PARK DR.
PORT WASHINGTON, NY 11050

DO NOT WRITE IN THIS SPACE



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number
13-3938051

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SPAMPINATO, JORGE
11611 SW 97 ST
MIAMI, FL 33176

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KIM, JUSTIN
STREET ADDRESS	488-00 43RD AVENUE 67 Westminister Rd.
CITY - ST - ZIP	FLUSHING, NY 11358 Great Neck, NY 11020
TITLE	S
NAME	KIM, TODD
STREET ADDRESS	182 HICKORY AVENUE
CITY - ST - ZIP	TENAFLY, NJ 07670
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

600065847956
02/14/06--01049--009 **158.75

DO NOT WRITE IN THIS SPACE

K. Eckel JAN 23 2006

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Todd Kim CFO DATE: 1/12/06 516-626-7108

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #