2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G82827

FILED Jan 10, 2007 Secretary of State

Entity Name: JJW CONSTRUCTION, INC.

Current P	rincipal Place	of Bus	iness:	New Principal Place	
	CNAB ROAD ERDALE, FL 33	309	US		
Current M	lailing Addres	s:		New Mailing Addr	ess:
	CNAB ROAD ERDALE, FL 3:	3309	US		
FEI Number	: 59-2364113	FEI Nu	ımber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent	Registered Agent:	Name and Address	s of New Registered Agent:
901 PONC PENTHOL	M, R. EARL DE DELEON BV JSE STE 331340009 US				
	e named entity s e of Florida.	ubmits	this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,
SIGNATU	RE:				
	Electron	ic Signa	ature of Registered Ag	ent	Date
Election Ca		-	ature of Registered Agound Contribution ().	ent	Date
		Trust F	-		Date IGES TO OFFICERS AND DIRECTOR
OFFICER Title: Name: Address:	mpaign Financing	Trust F FORS: Delete PH J., B ROAD	-		
DFFICER. Title: Name: Address: Dity-St-Zip: Title: Name: Address:	S AND DIRECT CT () WALSH, JOSEF 1670 W MCNAB FT LAUDERDAL	Delete PH J., B ROAD E.F., FL Delete PAS F., TERRAC	und Contribution ().	ADDITIONS/CHAN Title: Name: Address:	IGES TO OFFICERS AND DIRECTOR
	THE PLANTATION, F	I Trust F FORS: Delete PH J., ROAD E, FL Delete AS F., TERRAC L Delete IIS L., Y #109	und Contribution ().	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	IGES TO OFFICERS AND DIRECTOR () Change () Addition
DFFICER Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Name: Address:	S AND DIRECT CT () WALSH, JOSEF 1670 W MCNAB FT LAUDERDAL DP () WALSH, THOM/ 731 NW 101ST PLANTATION, F DVS () GOFFAR, DENN 3507 OAKS WA POMPANO BEA	Trust F FORS: Delete PH J., ROAD E, FL Delete AS F., TERRAC L Delete IIS L., Y #109 CH, FL Delete LAR, ROAD	und Contribution ().	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	IGES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS L GOFFAR V 01/10/2007