2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000034499

1. Entity Name JPW ENTERPRISES, LLC



Principal Place of Business

10008 W. OAKLAND PARK BLVD. r.

SUNRISE, FL 33351

Mailing Address

10008 W. OAKLAND PARK BLVD.

SUNRISE, FL 33351

FILED Jan 31, 2005 8:00 am Secretary of State

01-31-2005 90204 015 ****50.00



01112005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number		17	Applied For
22-3888169		i	Not Applicable
5. Certificate of Status Desired	Π,	\$5.00 A Fee Requi	

6. Name and Address of Current Registered Agent

WILLIE, JOHN P 10008 W. OAKLAND PARK BLVD. SUNRISE, FL 33351

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: M

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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.	Signature, typed or printed name of registered agent and title if a	ipplicable. (NOTE: Registered	Agent signature required wh) in reinstating) DATE			
	iling Fee is \$50.00 ue by May 1, 2005				•		
	<u> </u>	Λ'-(1' b) 1 ≥4	· · · · · · · · · · · · · · · · · · ·				
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MA MGR WILLIE, JOHN P 10008 W. OAKLAND PARK BLVD. SUNRISE, FL 33351	NAGEHS - '			:		
TITLE NAME STREET ADDRESS CHTY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-SI-ZIP			Samuel Samuel Samuel	DO NOT WRIT			
TITLE NAME STREET ADORESS CITY-ST-ZIP				IN THIS SPAC	E		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			3				
11. I hereby indicated limited lia	certify that the information supplied with this filling on this report is true and accurate and that my ability company or the receiver or trusted empore	ng does not qualify for the exe signature shall have the same wered to execute this report as	mption stated in Secti e legal effect as if mai required by Chapter	ion 119.07(3)(i), Florida Statutes. I further c de under oath; that I am a managing mem r 608, Florida Statutes.	ertify that the information ber or manager of the		