

**FOR PROFIT CORPORATION
2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED
May 15, 2002 8:00 am
Secretary of State**

05-15-2002 90102 020 ***150.00

DOCUMENT # P01000026930
1. Entity Name
 JWLX Corp.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 13220 S.W. 98th Pl. Suite, Apt. #, etc.	3. Mailing Address 13220 S.W. 98th Pl. Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0549771	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

City & State Miami, FL	City & State Miami, FL	Zip 33176-6113	Country
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DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Wu, Jiping
Street Address (P.O. Box Number is Not Acceptable) 13220 S.W. 98th Pl.
City Miami
State FL
Zip Code 33176-6113

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.

SIGNATURE *Jiping Wu* **DATE** 4/26/02

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE D/P	NAME Wu, Jiping	STREET ADDRESS 13220 S.W. 98th Pl.	CITY - ST - ZIP Miami, FL 33176-6113
TITLE D/S/T	NAME Xu, Lin	STREET ADDRESS 13220 S.W. 98th Pl.	CITY - ST - ZIP Miami, FL 33176-6113
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jiping Wu* **Jiping Wu** **DATE** 4/26/02 **DAYTIME PHONE #** 305-477-1277

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

CR2E034B (12/01)