

2003

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90231 030 ***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.		
City & State Miami, FL			City & State Miami, FL		
Zip 33176-6113	Country USA	Zip 33176-6113	Country USA	4. FEI Number 65-0	
DO NOT WRITE IN THIS SPACE				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				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	Zip Code FL 33176
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 applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P Wu, Jiping 13220 S.W. 98th Pl. Miami, FL 33176		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S/T Xu, Lin 13220 S.W. 98th Pl. Miami, FL 33176		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. 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 10 or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			Jiping Wu		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____		
			Daytime Phone # 305-477-1277		

CR2E034B (12/02)