

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2002 8:00 am
Secretary of State

01-09-2002 90013 033 \*\*\*150.00

DOCUMENT # P01000099584
1. Entity Name
JJW CORPORATION

Principal Place of Business
9144 GALLEON CT
ORLANDO FL 32819
Mailing Address
9144 GALLEON CT
ORLANDO FL 32819



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3. Mailing Address
Suite, Apt. #, etc.
City & State

4. FEI Number
59-3250279
Applied For
Not Applicable
5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WILDER, CHARLES D
1132 SYMONDS AVE
WINTER PARK FL 32789

7. Name and Address of New Registered Agent
Name: DR JOSEPH WISE
Street Address: 9144 GALLEON CT
City: ORLANDO FL Zip Code: 32819

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: JOSEPH WISE
DATE: 1/4/02

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Table with 2 columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Rows include: WISE, JOSEPH W J., DARIO M SUNDSTROM, GARY M. RUSSELL.

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.
SIGNATURE: [Signature]
Date: 1/4/02
Daytime Phone #: 407/4159210

CR2E034 (9/01)

Attachment 16594  
 #PO1000099584

AMOUNT OF DEPOSIT (Do NOT type, please print)		TYPE OF TAX		TAX PERIOD
DOLLARS	CENTS			
		<input type="checkbox"/> 941	<input type="checkbox"/> 945	<input type="checkbox"/> 1st Quarter
		<input type="checkbox"/> 990-C	<input type="checkbox"/> 1120	<input type="checkbox"/> 2nd Quarter
		<input type="checkbox"/> 943	<input type="checkbox"/> 990-T	<input type="checkbox"/> 3rd Quarter
		<input type="checkbox"/> 720	<input type="checkbox"/> 990-PF	<input type="checkbox"/> 4th Quarter
		<input type="checkbox"/> CT-1	<input type="checkbox"/> 1042	
		<input type="checkbox"/> 940		

Mark the "X" in this box only if there is a change to Employer Identification Number (EIN) or Name.

See instructions on page 1.

BANK NAME/ DATE STAMP

**EIN** 59-3750279 192612

**JJW CORPORATION**  
 9144 GALLEON CT  
 ORLANDO FL 32819-4052

IRS USE ONLY

*VOID*

62

07 2 Telephone number ( )

FOR BANK USE IN MICR ENCODING

**Federal Tax Deposit Coupon**  
**Form 8109** (Rev. 12-2000)