FOR PROFIT CORPORATION

) Q.AA a.

UNIFORM BUSINESS REPORT	(UBR)	Apr 10, 2002 8:00 am
DOCUMENT # PO1000102665 1. Entity Name		Secretary of State 04-16-2002 90142 026 ***150.00
LWJ Group, Inc.	,	04-16-2002 90142 026 *** 130.00
DO NOT WRITE IN THIS SPACE		
2. Principal Place of Business 2701 W. Oakland Park Blvd (Same	e as 2)	
Suite, Apt. #, etc. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State City & State		4. FEI Number Applied For Not Applicable
33311 Broward Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	Name	7. Name and Address of Current Registered Agent
DO NOT WRITE	Street Addres	S (P.O. Box Number is Not Acceptable)
IN THIS SPACE	2701	W. Oakland Park Blvd Ste 100
	City FT. L	AUDERDALE FL Zip 505311
8. The above named entity submits this etatement for the purpose of changing its re	egistered office or regis	stered agent, or both, in the State of Florida.
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature requ	irac when reinstation)
9. This corporation is eligible to satisfy its Intangible January 1 - Ma After May 1	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11. OFFICERS AND DIRECTORS	T Department of C	· ·
TITLE NAME Andrew Y. Winston STREET ADDRESS CITY-ST-ZIP FT. LANDERDALE, FL 33311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
Director NAME John K. LAWLOR STREET ADDRESS CITY-ST-ZIP FT. LANDERDALE, FL 33311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
Director CAM F. JUSTICE STREET ADDRESS CITY-ST-ZIP FT. LAUDER DALE, FL 33311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
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 approved.

SIGNATURE;