2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143491

Entity Name: JFW AMERICAN TECHNOLOGY, INC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5682 HAMMERMILL DRIVE 5650 NW 115 CT

HARRISBURG, NC 28075 US #206 DORAL, FL 33178

Current Mailing Address: New Mailing Address:

5650 NW 115 CT 5682 HAMMERMILL DRIVE

HARRISBURG, NC 28075 US #206 DORAL, FL 33178 US

FEI Number: 20-0555158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAU-LOPEZ, FARIDE E LOPEZ, JORDI J 1750 WEST 56TH STREET 5650 NW 115 CT

242 #206 DORAL, FL 33178 US HIALEAH, FL 33012 US

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: JORDI LOPEZ 05/01/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition LOPEZ, JORDI J Name: Name: LOPEZ, JORDI J

8618 CLARIDGE DR 5650 NW 115 CT #206 Address: Address: City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip: DORAL, FL 33178 US

Title: VΡ Title: (X) Change () Addition () Delete

DAU-LOPEZ, FARIDE E Name: DAU-LOPEZ, FARIDE E Name: 8618 CLARIDGE DR Address: 5650 NW 115 CT #206 Address: MIRAMAR, FL 33025 US DORAL, FL 33178 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: JORDI LOPEZ 05/01/2009