## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P04000098975**

1. Entity Name

EAST WEST TECHNOLOGY CORP.



Principal Place of Business

15814 CORPORATE CIRCLE JUPITER, FL 33478

Mailing Address

15814 CORPORATE CIRCLE JUPITER, FL 33478

FILED Jan 16, 2007 08:00 AM Secretary of State



01102007

No Chg-P

CR2E034 (11/05)

4. FEI Number 11-2321713 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

DAVIS, ALAN G 6791 CYPRESS COVE CIRCLE JUPITER, FL 33458

## DO NOT WRITE IN THIS SPACE

				•••	THO OF AGE	
	named entity submits this statement for the pations of registered agent.	purpose of changing its register	ed office or re	igistered agent, or bo	oth, in the State of Florida. I am familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registers	ed Agent signature	required when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000587325 01/17/07-80029-002 150	1.00
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, ALAN G 6791 CYPRESS COVE CIRCLE JUPITER, FL 33458					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGHTMAN, DAVID 19183 TAMARA LANE JUPITER, FL 33458			4		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGHTMAN, JEROME 123 VICTORIA LANE JUPITER, FL 33458			DO	NOT WRITE	

## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

PIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

111107

Daytime Phone #