

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000130844

Entity Name: JWMOA ASSOCIATES INC.

**FILED**  
**Jul 05, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1865 BRICKELL AVENUE  
PH 8  
MIAMI, FL 33129 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

1865 BRICKELL AVENUE  
PH 8  
MIAMI, FL 33129 US

## **New Mailing Address:**

FEI Number: 20-5810866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

WULFFAERT, JACQUES  
1865 BRICKELL AVENUE  
PH 8  
MIAMI, FL 33129 US

## **Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: PDVP  
Name: WULFFAERT, JACQUES  
Address: 1865 BRICKELL AVENUE, PH8  
City-St-Zip: MIAMI, FL 33129 US

Title: ST  
Name: WULFFAERT, JACQUES  
Address: 1865 BRICKELL AVENUE, PH8  
City-St-Zip: MIAMI, FL 33129 US

I hereby 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 all other like empowered.

SIGNATURE: JACQUES WULFFAERT

MR

07/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date