FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address 3840 S.W. 70TH AVE

MIRAMAR FL 33023-8683

or on an attachment with an address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

appears in Block 12 s

SIGNATURE

1515 N.W. 167TH ST. SUITE 227



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 12 1997 8:00am

Secretary of State

624-2440

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000055269 (2)

J & W UNITED CORPORATION

MIAMI FL 33169 Uŝ 3a. Date of Last Report 3. Date Incorporated or Qualified 07/26/1994 09/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0509918 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WILLIAMS, LISA 3840 S.W. 70TH AVENUE 62 Street Address (P.O. Box Number is Not Acceptable) MIRAMAR FL 33023 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pricted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ___ DELETE HILE 1.1 TITLE Change Addition JONES, ROBERT L MAINE 1.2 NAME 17120 NW 11TH AVE. STREET ADORESS 1.3 STREET ADDRESS **MIAMI FL 33169** 1.4 CITY - ST- ZIP City St Zit DELETE 2.1 TITLE ☐ Change Addition TITLE JONES, LINDA L NAME 2.2 NAME 17120 NW 11TH AVE. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33169** CITY-ST-7it* 2. 4 CITY - ST - ZIP DELETE TITLE Change Addition 3.1 THILE WILLIAMS, DAVID L 3.2 NAME 3840 SW 70TH AVE. STREET ATURESS 3.3 STREET ADDRESS MIRAMAR FL City St-2ii 3.4. CITY-ST-ZIP DELETE Change Addition THE 4.1 TITLE WILLIAMS, LISA L NAME 4. 2 NAME 3840 SW 70TH AVE. STREET ADORESS 4.3 STREET ADDRESS MIRAMAR FL 4.4 CITY-ST-ZIP CITY-ST-20P DELETE Change Addition THLE 5.1 TITLE MALIF 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS \$117 - \$1 - Zif* 5.4 CITY-\$T-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST 7# 6.4 CITY-ST-ZIP 14. I do 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 annual report or supplemental annual 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 option or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SA L WILLAM