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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000071998 (6)

J.W. TV PRODUCTS, INC. Principal Place of Business Mailing Address 2371 NW 93RD LANE SURISE FL 33322 SUNRISE FL 33322-3261 US							
					3. Date Incorporated or Qualified 09/26/1994	3a. Date of La 04/17/19	
2. Principal Place of Business 21		2a. Mailing Address 26	2a. Mailing Address 26		4. FEI Number 65-0523262		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	s Desired S8.75 Additional Fee Required	
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country 25	Zip	Country 30		8. This corporation has liability fo		
	9. Name and Address of (Current Registered Agent			10. Name and Address of New R	egistered Agent	
	VARDS, GEORGE E ESQ.	W #44n	81	Name			
	North Federal Highwa Mpano Beach Fl 33062	N, #112	82 Street Add		ess (P.O. Box Numbor is Not Accepta	ible)	
FO	MEANIO DEADEN I E 33002		83				
			84	City		FL 85	Zip Code
11. Pursuant office or a agent. I a	to the provisions of Sections 60 registered agent, or both, in the maniliar with, and accept the	07.0502 and 607.1508, Florida Statute State of Florida. Such change was a obligations of, Section 607.0505, Flo	es, the above authorized by orida Statutes	named corp the corporat	oration submits this statement for the ion's board of directors. I hereby according to the control of the contr		ing its registered it as registered
	Signature, typod or printed name of regis?			ıl signatırı: requi	rea when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	DOSS, WALLACE	DELETE DELETE		1		Cna	ange [] Addition [
NAME Street Address	2371 N.W. 93RD LANE		1.2 NAME 1.3 STHEET ADDRESS				
CITY-ST-ZIP	SUNRISE FL 33322		1.4 City-S1-ZiP				
TITLE	D	DELETE	2.1 Till E	- 211		Cha	nge Addition
NAME	DOSS, JUDITH		2.2 NAME				
STREET ADDRESS			2.3 STHEET ADDRESS				ļ
CITY-ST-ZIP	SUNRISE FL 33322		2. 4 C(TY - S1 - Z(P				
TALE	[_] Delete		3.1 TITLE			☐ Cha	inge 🔲 Addilion
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	l l			
CITY-ST-ZIP	DELETE		34. CITY-S1 - ZIP 41 TITLE			Cha	one Addition
TITLE		L_ Ditti					inge L_ Addition
NAME STREET ADDRESS			4. 2 NAME	unnbree			
CITY-ST-ZIP			4.3 STREE1 a	1	-		}
TITLE	DELETE		51 TITLE	- 111	Change		inge Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET /	ADDRESS			
· CITY-ST-ZIP			5.4 C(1Y - S1	1			Í
TITLE	. f	DELETE	6.1 TITLE			Cha	ange Addition
NAME	. '	_	6.2 NAME			_	

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 eath; 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 12 or Block 13 if changed, or on an attachment with an address.

63 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Della Part IN

Judy Doss ulplan

(954)

FILED

Apr 24 1997 8:00am

Secretary of State