

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 09, 2003 8:00 am
Secretary of State

05-09-2003 90154 013 ***150.00

DOCUMENT # P96000069384



1. Entity Name
JW SYSTEMS, INC.

Principal Place of Business
**710 HERITAGE DR
WESTON FL 33326
US**

Mailing Address
**1321 ARBOR GATES DR. N.
ATLANTA GA 30324
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0695592**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WEISMAN, JEFFREY S
710 HERITAGE DR
WESTON FL 33326**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	WEISMAN, JEFFREY S	
STREET ADDRESS	710 HERITAGE DR	
CITY-ST-ZIP	WESTON FL 33326	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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 or 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03

404-816-8281

Date

Daytime Phone #

CR2E034 (10/02)

90132488

Attachment
#P960006934

JW Systems, Inc.
1321 Arbor Gates Dr NE
Atlanta, GA 30324
404-816-8281
jwsys@yahoo.com

May 5, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom it may concern:

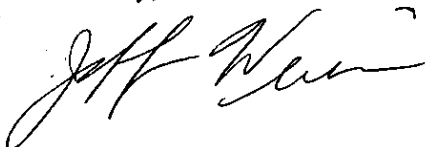
Please accept my apologies for not being able to have you receive this report before May 1st.

Unfortunately I been traveling quite a bit and I was out of the country on business on very short notice and did not have access to my files.

I apologize for any inconvenience this may have caused. Please accept this check for JW Systems, Inc. for the 2003 calendar year.

Thank you.

Sincerely,



Jeffrey S. Weisman