2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

04 FEB 16 PM 4: 22 **DOCUMENT # P98000031558** 1, Entity Name
JWH SECURITIES, INC. SECHLIARY OF STATE
TALLAHASSEE, FLORIDA UZULUUĞ. Mailing Address Principal Place of Business 301 YAMATO RD. 301 YAMATO RD. **SUITE 2200** SUITE 2200 BOCA RATON, FL 33431 BOCA RATON, FL 33431 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02022004 Chg-P 4. FEI Number Applied For City & State City & State 06-1512227 Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo BRAICA, PAULD BARRY R. GAINEBURY 301 YAMATO ROAD Street Address (P.O. Box Number is Not Acceptable) STE 2200 BOCA RATON, FL 33431-4931 Zip Code City 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 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ■ Addition VPD Delete TITLE Change TITLE BRAICA, PAUL D NAME NAME STREET ADDRESS STREET ADDRESS 301 YAMATO ROAD, SUITE 2200 CITY-ST-ZIP BOCA RATON, FL 334314931 CTTY-ST-ZIP ☐ Addition ☐ Channe ☐ Delete TITLE TITLE NAME DINON, WILLIAM STREET ADDRESS 301 YAMATO RD SUITE 2200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Change Addition ☐ Delete TITLE TITLE TED PARKH:11 NALAF NAME STREET ADDRESS 301 YAMATO ROAD, STE 2200 STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP BOLA RATON, ITC 33.171 ☐ Change Addition ☐ Delete TITLE T D NAME Kenneth 5. webster NAME 301 YAMATO MOAD, STE 2200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA MATON FL 33431 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE BARRY R. GAINSburg 301 HAMATO MOAD, OFF 2200 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP B 0c4_ KATON FL 33431 Change Addition | Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I horoby certify that the information supplied with this filling 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. M. GA: Sbug, Stanting BARMY M. 561- 912-0841 SIGNATURE:

02-10-2004 90030 017 ****61.25

P98000031558