2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006
Secretary of State

DOCUMENT# P98000091894

Entity Name: J.W.P. AND ASSOCIATES, INC.

Current Principal Place of Business:

850 S.W. MUNJACK COVE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

850 S.W. MUNJACK COVE
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 65-0876159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, MAX A CPA
7600 RED ROAD
STE 334
MIAMI, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HUAROTO, KATHY
Address: 850 S.W. MUNJACK COVE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D ( ) Delete
Name: HUAROTO, GUSTAVO
Address: 850 S.W. MUNJACK COVE
City-St-Zip: PORT ST. LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GUSTAVO HUAROTO D 03/20/2006

Electronic Signature of Signing Officer or Director — Date