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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

3015-16TH STREET



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$95545

(7)

Mailing Address

3015- 16TH STREET

J & W MANUFACTURING, INC.

FILED Apr 23 1997 8:00am Secretary of State

US	IRG FL 33704	ST. PETERSBURG FL 33 US	704-1922	3. Date Incorporated or Qualified	3a. Date of Last Report
				11/20/1991	05/09/1996
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3097052	Not Applicable
Suite Apt.	. #, otc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 23	lo	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	egistered Agent
	TAGLIA, WAYNE M		81 Nar	ne	
	1-16TH ST N		82 Stre	et Address (P.O. Box Number is Not Accepta	ble)
	5-BIRCH STREET, NORTH EAST				
\$T.	PETERSBURG FL 33703		83		
			84 City	, , , , , , , , , , , , , , , , , , , ,	85 Zip Code
					FL s z code
agent La SIGNATURE	am familiar with, and accept the oblig	,		sture required when reinstalling)	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TIFLE	D	DELETE	1,1 TITLE	1,551,101,101,101,101	Change Addition
NAVE	BATTAGLIA, WAYNE M		1.2 NAME		
STREET ADDRESS	4365-BIRCH STREET, N.E.		1.3 STREET ADDRE	28	
City - St - ZiP	ST. PETERSBURG FL		1.4 CITY - ST - ZIP		
THILE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME	•	
STREET ADDRESS	1		23 STREET ADDRE	SS .	
CITY-ST-ZP			2 4 City-St-ZiP		
HILE		DELETE	31 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRE	ss	
	1				
CITY-ST-7-P			3.4. CITY - ST - ZIP		
		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
CITY-\$1-7-P		DELETE			Change Addition
CHY-\$1-7P TITLE		☐ DELETE	4.1 TITLE	SS	Change Addition
DITY-ST-Z-P TITLE NAME		_	4.1 TITLE 4. 2 NAME	SS	Change Addition
DITY-\$1-Z/P TITLE NAME STREET ADDRESS		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE	\$\$	
DITY-ST-Z/P TITLE NAME STREET ADDIRESS COLY-ST-ZIP		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY - ST - ZIP	ss	
DITY-ST-ZP TITE NAME STREET ADDRESS COLY-ST-ZP TITLE		_	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRE 4.4 CITY - ST - ZIP 5.1 TITLE		
DITY-ST-ZP TIFLE NAME STREET ADDRESS CUTY-ST-2P TIFLE NAME		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		
CITY-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE		Change Addition
DITY-ST-ZP TITEF NAME STREET ADDRESS COTY-ST-ZP TITLE NAME STREET ADDRESS COTY-ST-ZP		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.4 CITY - ST - ZIP		☐ Change ☐ Addition
DITY-ST-ZP TITLE NAME STREET ADDRESS COY-ST-ZP TITLE NAME STREET ADDRESS COT-ST-ZP TITLE		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.4 CITY - ST - ZIP 6.1 TITLE	SS .	Change Addition

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 is 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 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.

SIGNATURE: Signature AND PRINTED NAME OF SKINING OFFICER ON DIRECTOR OF DIRECTOR DATE OF SIGNATURE OF SKINING OFFICER ON DIRECTOR