

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0406153 AV

DOCUMENT # J80341

1. Entity Name
W.F.E., INC.



FILED

03 APR 25 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
BROAD AND CASSEL
7777 GLADES RD. SUITE 300
BOCA RATON FL 33434

Mailing Address
BROAD AND CASSEL
7777 GLADES RD. SUITE 300
BOCA RATON FL 33434

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 98-0085260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEUTCH, JEFFREY A.
7777 GLADES RD.
SUITE 300
BOCA RATON FL 33434

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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	PSD POMERANTZ, SAUL 8600 DECARIE BLVD., SUITE 200 TOWN OF MOUNT ROYAL QC	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVD GATTINGER, FRANKLIN J. 8600 DECARIE BLVD, SUITE 200 TOWN OF MOUNT ROYAL QC	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD ESPOSITO, RAPHAEL JR 8600 DECARIE BLVD #200 MT ROYAL, QC, CANADA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POMERANTZ, ALICE 8600 DECARIE BLVD, SUITE 200 TOWN OF MOUNT ROYAL, QC H4P 2N2	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, D, S POMERANTZ, TERRY 8600 DECARIE BLVD, SUITE 200 TOWN OF MOUNT ROYAL, QC H4P 2N2	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 RAPHAEL ESPOSITO JR. 2003-04-07 (514) 341-8600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)