2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000115695

FILED Apr 19, 2004 8:00 am Secretary of State 04-02-2004 90037 029 ***150.00

1. Entity Name WOHL 2 WOHL PRODUCTIONS, INC.								_	
Principal Place 11280 GREEN FT. MYERS, FL	nsedge landing CT.	Mailing Address 11280 GREENSEDGE LA FT. MYERS, FL 33908	1280 GREENSEDGE LANDING CT.		66412431				
2. Principal Pla	ace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03052004	Chg-P		4 (10/03)	
City & State		City & State			4. FEI Number	98-44937	113		lied For Applicable
Zíp	Country	Zip	Coun	try	5. Certificate o	f Status Desired		8.75 Additi	
6. Name and Address of Current Registered Agent				Name	7. Name and	Address of New Re	agistered A	gent	 -
JOSEPH LT BERNSTEIN, P.A. 707 S.E. 3RD AVE., 3RD FLOOR				Street Address (P.O. Box Number is Not Acceptable)					
FT. LAUUE	ERDALE, FL 33316					·			
				City			FL	Zip Code	1
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 opens and title if applicable. (NOTE: Registered Agens algreture required when reinstating) DATE									
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Published Campaign Financing Trust Fund Contribution.					5.00 May Be ided to Fees				
10.	OFFICERS AND		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND		
TITLE	PTD WOHL, ARNOLD J	Delete	TTTL NAM	· .				Change	Addition
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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 suppliemental 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 truebase 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 apother like empowered.									
SIGNATURE: BIGHATURE AND TYPED ON PRINTED NAME OF BOANS OFFICER ON									