

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000049361

FILED  
Aug 04, 2009  
Secretary of State

Entity Name: BETTER WAZE INC.

**Current Principal Place of Business:**

1433 SOUTH BELCHER ROAD  
B-7  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

1433 SOUTH BELCHER ROAD  
B-7  
CLEARWATER, FL 33764 US

**New Mailing Address:**

FEI Number: 26-2772665      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WASILEWSKI, DAVID  
1433 SOUTH BELCHER ROAD  
B-7  
CLEARWATER, FL 33764 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P, D ( ) Delete  
Name: WASILEWSKI, DAVID  
Address: 1433 SOUTH BELCHER ROAD, B-7  
City-St-Zip: CLEARWATER, FL 33764 US

Title: S, D ( ) Delete  
Name: DIMOND, DAVID  
Address: 1433 SOUTH BELCHER ROAD, B-7  
City-St-Zip: CLEARWATER, FL 33764 US

Title: T ( ) Delete  
Name: WASILEWSKI, DAVID  
Address: 1433 SOUTH BELCHER ROAD, B-7  
City-St-Zip: CLEARWATER, FL 33764 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P, D (X) Change ( ) Addition  
Name: WASILEWSKI, DAVID  
Address: PO BOX 5898  
City-St-Zip: CLEARWATER, FL 33758 US

Title: S, D (X) Change ( ) Addition  
Name: DIMOND, DAVID  
Address: PO BOX 5898  
City-St-Zip: CLEARWATER, FL 33758 US

Title: T (X) Change ( ) Addition  
Name: WASILEWSKI, DAVID  
Address: PO BOX 5898  
City-St-Zip: CLEARWATER, FL 33758 US

I hereby certify that the information supplied with this filing does not qualify 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: DAVID WASILEWSKI

P,D

08/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date