


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000044834**  
 1. Entity Name  
**WOLF REALTY CORP.**



Principal Place of Business      Mailing Address  
**5801 CONGRESS AVE**      **5801 CONGRESS AVE**  
**BOCA RATON, FL 33487**      **BOCA RATON, FL 33487**

**DO NOT WRITE IN THIS SPACE**



03112008    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>65-0509223</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**MOMBACH, GEOFFREY S**  
**500 E BROWARD BLVD**  
**SUITE 1950**  
**FORT LAUDERALE, FL 33394**

**DO NOT WRITE IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOLF, ERIC 5801 CONGRESS AVE. BOCA RATON, FL 33487
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 04/09/08-80009-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or other like empowerment.

**SIGNATURE:** \_\_\_\_\_ PRES      3/20/08      561-960-9454  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #