I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT OEHL

Electronic Signature of Signing Officer/Director Detail

289 SE 82ND ST STARKE, FL 32091 US

DOCUMENT# N0600004254

Entity Name: WINGS OF DREAMS INC.

Current Principal Place of Business:

FEI Number: 65-1284395

Current Mailing Address:

Name and Address of Current Registered Agent:

OEHL, ROBERT A 289 SE 82ND ST STARKE, FL 32091 US

289 SE 82ND ST STARKE, FL 32091

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	: ROBERT A. OEHL			04/20/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR	
Name	OEHL, ROBERT A	Name	ASHLEY, GREGORY	
Address	289 SE 82ND ST.	Address	289 SE 82ND ST	
City-State-Zip:	STARKE FL 32091	City-State-Zip:	STARKE FL 32091	

Certificate of Status Desired: No

PRESIDENT

04/20/2019 Date

FILED Apr 20, 2019 Secretary of State 6043195168CC

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT