

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000076300

**Entity Name:** WUFFOLUTIONS, INC.

**Current Principal Place of Business:**

2650 BAHIA VISTA STREET  
SUITE 301  
SARASOTA, FL 34239

**Current Mailing Address:**

2650 BAHIA VISTA STREET  
SUITE 301  
SARASOTA, FL 34239

**FEI Number:** 47-1837238

**Certificate of Status Desired:** No

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

BOUDREAUX-NG, NANCY  
2650 BAHIA VISTA STREET  
SUITE 301  
SARASOTA, FL 34239 US

*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

**Officer/Director Detail :**

Title P, D  
Name BOUDREAUX-NG, NANCY  
Address 2650 BAHIA VISTA STREET SUITE 301  
City-State-Zip: SARASOTA FL 34239

Title VP  
Name NG, RENE  
Address 2650 BAHIA VISTA STREET SUITE 301  
City-State-Zip: SARASOTA FL 34239

Title T  
Name BOUDREAUX-NG, NANCY  
Address 2650 BAHIA VISTA STREET SUITE 301  
City-State-Zip: SARASOTA FL 34239

Title S, D  
Name NG, RENE  
Address 2650 BAHIA VISTA STREET SUITE 301  
City-State-Zip: SARASOTA FL 34239

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

**SIGNATURE:** NANCY BOUDREAUX-NG

**PRESIDENT**

**03/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date