

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429177

FILED
Jun 29, 2005
Secretary of State

Entity Name: WISE VENTURES, INC,

Current Principal Place of Business:

5809 BEGGS RD.
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

5809 BEGGS RD.
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 59-1469536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISE, CHRISTOPHER R.
5809 BEGGS ROAD
ORLANDO, FL 32810 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: WISE, CHRISTOPHER R
Address: 3709 BOBOLINK LANE
City-St-Zip: ORLANDO, FL 32810

Title: P () Delete
Name: WISE, CHRISTOPHER
Address: 113 W. 15TH ST.
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: WISE, MARK A
Address: 5817 BEGGS RD. #9
City-St-Zip: ORLANDO, FL 32810

Title: VP () Delete
Name: WISE, JOSEPH
Address: 5817 BEGGS RD. #9
City-St-Zip: ORLANDO, FL 32810

Title: VP () Delete
Name: WISE, MATTHEW
Address: 5817 BEGGS RD. #9
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER WISE

P

06/29/2005

Electronic Signature of Signing Officer or Director

_____ Date