

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429177

FILED  
Jan 17, 2006  
Secretary of State

Entity Name: WISE VENTURES, INC,

## Current Principal Place of Business:

5809 BEGGS RD.  
ORLANDO, FL 32810

## New Principal Place of Business:

5817 BEGGS RD.  
SUITE 9  
ORLANDO, FL 32810

## Current Mailing Address:

5809 BEGGS RD.  
ORLANDO, FL 32810

## New Mailing Address:

5817 BEGGS RD.  
SUITE 9  
ORLANDO, FL 32810

FEI Number: 59-2616869

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:

WISE, CHRISTOPHER R.  
5817 BEGGS ROAD  
SUITE 9  
ORLANDO, FL 32810 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: CHRISTOPHER WISE

01/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER WISE

P

01/17/2006

Electronic Signature of Signing Officer or Director

Date