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:				New Principal Place of Business:	
5809 BEGGORLANDO	GS RD.), FL 32810			5817 BEGGS RD. SUITE 9 ORLANDO, FL 32810	
Current Mailing Address:				New Mailing Address:	
5809 BEGGORLANDO	GS RD.), FL 32810			5817 BEGGS RD. SUITE 9 ORLANDO, FL 32810	
FEI Number:	59-2616869	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
WISE, CHRISTOPHER R. 5809 BEGGS ROAD ORLANDO, FL 32810 US				WISE, CHRISTOPHER R. 5817 BEGGS ROAD SUITE 9 ORLANDO, FL 32810 US	
	named entity of Florida.	submits this statement for the p	urpose o	f changing its registered c	ffice or registered agent, or both,
SIGNATURE: CHRISTOPHER WISE					01/17/2006
	Electror	ic Signature of Registered Age	ent		Date
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (WISE, CHRIST 113 W. 15TH S SANFORD, FL	т.		Title: () Name: Address: City-St-Zip:) Change()Addition
Title: Name: Address: City-St-Zip:	S (WISE, MARK A 5817 BEGGS F ORLANDO, FL	RD. #9		Title: () Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	VP (WISE, JOSEPH 5817 BEGGS F ORLANDO, FL	RD. #9		Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name:	VP () WISE, MATTHE	Delete W		Title: ()) Change ()Addition

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.

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHER WISE P 01/17/2006

5817 BEGGS RD. #9

ORLANDO, FL 32810

Address:

City-St-Zip: