## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED

## Mar 10, 2004 8:00 am Secretary of State DOCUMENT # F01000000095 1. Entity Name 03-10-2004 90017 033 \*\*\*150.00 WEAL SEA INC. Principal Place of Business Mailing Address 14540 RED FOX RUN #304 14540 RED FOX RUN #304 \*^\*OUU NAPLES, FL 34110-7012 NAPLES, FL 34110-7012 Suite, Apt. #, etc. 03052004 CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 'oral 41-1845119 ape ( Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Name and Address of New Registered Agent --6. Name and Address of Current Registered Agent Douglas MADSEN, DOUGLAS R Street Address (P.O. Box Number is Not Acceptable) 14540 RED FOX RUN #304 NAPLE'S, FL 34110-7012 20th Place zip.C39990 oral 8. 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. I am familiar with, and accept the obligation of registered age, Douglas K Madsen SIGNATURE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Mādsen, Douglas R ☐ Addition ☐ Defete TITLE TITLE NAME MADSEN, DOUGLAS R NAME 227 SE 20th Place ape Coral FL 3396 14540 RED FOX RUN #304 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES, FL CITY-ST-ZIP T D VSTD ☐ Delete TITLE Change Addition TITLE MADSEN, VERONICA J NAME Madsen Veronica NAME STREET ADDRESS 14540 RED FOX RUN #304 STREET ADDRESS NAPLES, FL CITY-ST-7P CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C:TY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZP CITY-ST-ZIP ☐ Addition Delete TITI F Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P 12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if all other like empowered changed, or on an attac eronica

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