2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000002034

WILSON, PATRICIA

22980 LYNX COURT

SANFORD, FL 32771

Name:

Address:

City-St-Zip:

Entity Name: WILSON CONSULTANTS ENTERPRISE CORP.

FILED Jun 28, 2007 Secretary of State

Current P	rincipal Pla	ce of Business:	New Principal	New Principal Place of Business:		
2469 JOHN YOUNG PKWY SUITE P ORLANDO, FL 32804 US			1851 N.W. 125T SUITE 420 PEMBROKE PIN		US	
Current M	lailing Addr	ess:	New Mailing A	New Mailing Address:		
PO BOX 9 HOUMA, L		US	1851 N.W. 125T SUITE 420 PEMBROKE PIN		US	
FEI Number	: 36-4471315	FEI Number Applied For ()	FEI Number Not Applicable	() Certifica	ate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Add	Name and Address of New Registered Agent:		
	SHELDON EY HAMMO), FL 32771	CK TRAIL US				
	named entit e of Florida.	y submits this statement for the	e purpose of changing its reg	jistered office or i	registered agent, or both,	
SIGNATU	RE:					
	Electr	onic Signature of Registered A	gent		Date	
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CH	IANGES TO OFF	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WILSON, SH 178 OSPREY SANFORD, F	' HAMMOCK TRAIL L 32771	Title: Name: Address: City-St-Zip:	() Change	. ,	
Title:	S	() Delete	Title:	() Change	() Addition	

Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHELDON L. WILSON CEO 06/28/2007