

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # H30704**

1. Entity Name  
**WAHOO WAH, INC.**



Principal Place of Business

% E. JACKSON BOGGS  
501 E. KENNEDY BLVD, S-1700  
TAMPA, FL 33602

Mailing Address

% E. JACKSON BOGGS  
501 E. KENNEDY BLVD, S-1700  
TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**



07072004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2466783**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BOGGS, E. JACKSON  
501 E. KENNEDY BLVD  
SUITE 1700  
TAMPA, FL 33602

**DO NOT WRITE  
IN THIS SPACE**

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 obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPS  
BOGGS, E. JACKSON  
501 E KENNEDY BLVD #1700  
TAMPA, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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1000000165315  
07/12/04-80009-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 9a, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*E. Jackson Boggs*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**E. Jackson Boggs, President**

7/8/04  
Date

(813) 228-7411  
Daytime Phone #