## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K51892

FILED Apr 20, 2005 Secretary of State

Entity Name: WINGS RESTAURANT & PUB, ETC., INC.

**Current Principal Place of Business: New Principal Place of Business:** 1319 FLORIDA MALL AVE. ORLANDO, FL 32809 **Current Mailing Address: New Mailing Address:** 1319 FLORIDA MALL AVE. ORLANDO, FL 32809 FEI Number: 59-2923500 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ACCOUNTING SERVICES OF ORLANDO INC 1005 W OAKRIDGE ROAD ORLANDO, FL 32809 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition MORINES, JOSE Name: Name: RODRIGUEZ, JUAN 5141 BRIGHTMOOR CR 4932 BRIGHTMOUR CR Address: Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32837 Title: Title: (X) Delete () Change () Addition RODRIGUEZ, JUAN Name: Name: 4932 BRIGHTMOOR CR Address: Address: ORLANDO, FL 32837 City-St-Zip: City-St-Zip: Title: Title: (X) Delete ( ) Change ( ) Addition ZAVERELLA, NELSON Name: Name: 5177 BRIGHTMOOR CR Address: Address: ORLANDO, FL 32837 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GONCALVES, JOSE MIGUEL Name: Name: Address: 14013 ISLAMORADA DR. Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: Title: Title: () Delete () Change () Addition GUERRA, JOSE Name: Name: 14208 ISLA MORADA DR. Address: Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition ABREU, JOSE Name: Name: ABREU, JOSE 1319 FLORIDA MOLL AVE Address: Address: 1319 FLORIDA MALL AVE City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUAN RODRIGUEZ P 04/20/2005