

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66475

FILED
Apr 07, 2008
Secretary of State

Entity Name: WEALTH COACH SERVICES, CORP.

Current Principal Place of Business:

800 FAIRWAY DR. #370
DEERFIELD BEACH, FL 334411831

New Principal Place of Business:

2400 N. COMMERCE PKWY
SUITE 307
WESTON, FL 33326

Current Mailing Address:

2457 EAGLE RUN DRIVE
WESTON, FL 33327

New Mailing Address:

FEI Number: 65-0300866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GROSS, IRWIN L
2457 EAGLE RUN DR.
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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:

Title: P-D () Delete
Name: GROSS, IRWIN L
Address: 2457 EAGLE RUN DRIVE
City-St-Zip: WESTON, FL 33327

Title: VP-D () Delete
Name: DUART, ANDRE
Address: 800 FAIRWAY DR. #370
City-St-Zip: DEERFIELD BEACH, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP-D (X) Change () Addition
Name: DUART, ANDRE
Address: 2400 N. COMMERCE PKWY
City-St-Zip: WESTON, FL 33326

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: IRWIN GROSS

P-D

04/07/2008

Electronic Signature of Signing Officer or Director

_____ Date