2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 21, 2005 08:00 AM --- Secretary of State

DOCUMENT # L36422 1. Entity Name WELLCORP I, INC. Principal Place of Business Mailing Address 1500 WEST CYPRESS CREEK ROAD SUITE 409 Mailing Address 1500 WEST CYPRESS CREEK ROAD SUITE 409				Sec	retary o	of State
DO NOT WRITE IN THIS SPACE. 6. Name and Address of Current Registered Agent		- 54	03142005 4. FEI Number 65-017		CR2E034 (10	
SCHULTZ, MICAHEL E C/O BRINNER REAL ESTATE GRO 1500 WEST CYPRESS CREEK RO FORT LAUDERDALE, FL 33309	DUP	ed office or register	IN 7	NOT W	ACE	with, and accept
Signature, typed or printed name of register. FILE NOW!!! FEE IS \$150.0 After May 1, 2005 Fee will be \$	9. Election Campaign Final	d Agent signature required	when reinstating) OO May Be ed to Fees		DATE	
10. OFFICER: TITLE DVP NAME SCHULTZ, MICHAEL E STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP	The state of the s			(3/21/05-)	271955 30069-003	150.00
TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				NOT W THIS SF		
NAME STREET ADDRESS CITY-ST-ZIP TUTLE						

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/05

Daytime Phone #