

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000232

FILED
Feb 21, 2006
Secretary of State

Entity Name: WE READ, INC.

Current Principal Place of Business:

PO BOX 272486
BOCA RATON, FL 33427

New Principal Place of Business:

Current Mailing Address:

PO BOX 272486
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 60-0002383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRUDEN, JAMES L ESQ
980 NORTH FEDERAL HIGHWAY, SUITE 404
BOCA RATON, FL 33432 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

OFFICERS AND DIRECTORS:

Title: PM () Delete
Name: PERLMAN, SAR
Address: 1150 NW 13 STREET, SUITE 160
City-St-Zip: BOCA RATON, FL 33486

Title: S () Delete
Name: THOMPSON, SHILO
Address: P.O. BOX 272486
City-St-Zip: BOCA RATON, FL 33427

Title: T () Delete
Name: NICKEL, RONALD F
Address: P.O. BOX 272486
City-St-Zip: BOCA RATON, FL 33427

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAR PERLMAN

PM

02/21/2006

Electronic Signature of Signing Officer or Director

Date