## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # N06000011944  1. Entity Name WSSB, INC.					Secretary of Sta			
Principal Place of Business Mailing Address 3329 JOHNSON ST 3329 JOHNSON ST								
HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021								
					***************************************	No Chg-NP	CR2E037 (	
	O NOT WRITE	IN THIS SPA	CE	Çş,r a∴,	4. FEl Numbe		· · · · · ·	Applied For
					NOT AF	PLICABLE		Not Applicable
		经的基础的			5. Certificate	of Status Desired		5 Additional lequired
6. Name and Address of Current Registered Agent								
BARBER, GARY S 3329 JOHNSON ST					DO	NOT WE	RITE	
HOLLYWOOD, FL 33021					r a min later ( a b	THIS SPA		
8. The above	named entity submits this statement for the	ne purpose of changing its register	ed office or re	acustere			ta Lam (amilia	r with, and accept
the obligat	tions of registered agent.	po poto oi onenging no regional		9		.,		,
SIGNATURE.	Signature, typed or printed name of registered agent and	utle / applicable (NOTE: Registere	d Agent signature r	required v	vhen reinstating)		DATE	
	PIN - F - 1 - 604 0P	9. Election Campaign Finar	ocina	e c	00 May Be			
	Filing Fee is \$61.25 Due by May 1, 2008	Trust Fund Contribution.			d to Fees			
10. OFFICERS AND DIRECTORS				<b>,</b> , , , , , , , , , , , , , , , , , ,				
TITLE NAME	D BARBER, GARY S							the front of the con-
STREET ADDRESS	3329 JOHNSON ST							All days to the second and the secon
CITY-ST-ZIP TITLE	HOLLYWOOD, FL 33021			4 i 3 i			45589	professional and the second
NAME DIRECT ADDRESS						03/17/09-8	00017004	70:00
STREET ADDRESS CITY ST-ZIP								
TITLE				( ) ( ) ( ) ( )				
NAME STREET ADDRESS				organisation of the state of th	ho	NOT W	DITE	
CITY-ST-ZIP	l				ولا إل	NOT WI		
TITLE NAME			ing in the second		: IN	THIS SP	ACE	
STREET ADDRESS CITY-ST-ZIP								
TITLE		<del></del>						
NAME							Terania.	
STREET ADDRESS CITY-ST-ZIP				Andria Transport				
INLE								
NAME STREET ADDRESS				1912 - ≸ 1914 - 1914 - 1		化水子分型 (1995) 1257 中枢 - 1996 (1995)		
CITY-ST-ZIP							· · · · · · · · · · · · · · · · · · ·	
indicated of the cor	certify that the information supplied with the on this report or supplemental reporties in poration or the receiver of trustes ampowed or on an attachment with an addings, with	is filing does not qualify for the ex- ue and accurate and that my signa- ared to execute this report as requi- nally that like empowered	emptions cont lure shall have red by Chapte	tained i e the sa er 617,	in Chapter 119 ame legal effec Florida Statute	<ul> <li>Honda Statutes I full it as if made under oat s; and that my name a</li> </ul>	rtner certify that th; that I am an appears in Bloc	it the information officer or director k 10 or Block 11 if

Gary S. Barber

BIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

02/25/08

954-987-2000 Daytime Phone #