2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028729

Entity Name: WBC SERVICES, INC.

FILED Jan 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13014 N. DALE MABRY, #628 TAMPA, FL 336182808

Current Mailing Address: New Mailing Address:

P. O. BOX 13243 TAMPA, FL 336813243

FEI Number: 59-3599261 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:

COSSETTE, B. VICTORIA
13014 N DALE MABRY., #628
TAMPA, FL 33618 US

COSSETTE, B. VICTORIA
PO BOX 13243
TAMPA, FL 33681 US

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: B. VICTORIA COSSETTE 01/26/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SANCHEZ, ROBERT
 Name:
 SANCHEZ, ROBERT

 Address:
 13014 N. DALE MABRY, #628
 Address:
 PO BOX 13243

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33681

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 SANCHEZ, JOE
 Name:
 SANCHEZ, JOE

 Address:
 13014 N. DALE MABRY, #628
 Address:
 PO BOX 13243

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33681

Title: STD () Delete Title: STD (X) Change () Addition

Name: COSSETTE, B. VICTORIA Name: COSSETTE, B. VICTORIA

Address: 13014 N. DALE MABRY, #628 Address: PO BOX 13243
City-St-Zip: TAMPA, FL 336182808 City-St-Zip: TAMPA, FL 33681

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: B. VICTORIA COSSETTE STD 01/26/2005