## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000038249

Entity Name: WLFI HOLDINGS, INC.

FILED Mar 16, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2665 S BAYSHORE DRIVE STE 800 MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 1801 NORTH ANDREWS AVENUE POMPANO BEACH, FL 33069 FEI Number: 65-1091927 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: GERSHMAN, DAVID 2665 S BAYSHORE DRIVE STE 800 MIAMI, FL 33133 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition KUFFNER, MARILYN D GERSHMAN, DAVID Name: Name: 2665 SO BAYSHORE DR STE 800 2665 SO BAYSHORE DR STE 800 Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133 Title: Title: ( ) Delete () Change () Addition Name: KOEHN ROBERT W Name: 2665 SOUTH BAYSHORE DRIVE, SUITE 800 Address: Address: MIAMI, FL 33133 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition CAO ( ) Delete TORTORICI, VINCENT A TORTORICI, VINCENT A Name: Name: 1801 N ANDREWS AVENUE 1801 N ANDREWS AVENUE Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069 Title: DC ( ) Delete Title: (X) Change ( ) Addition POWELL, EARL W POWELL, EARL W Name: Name: Address: 2665 SO BAYSHORE DR STE 800 Address: 2665 SO BAYSHORE DR STE 800 City-St-Zip: City-St-Zip: MIAMI, FL 33133 MIAMI, FL 33133 Title: Title: (X) Change ( ) Addition () Delete MORIARTY, GENE Name: MALONE, JAMES R Name: 1801 N ANDREWS AVENUE Address: 1801 N ANDREWS AVENUE Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINCENT TORTORICI V 03/16/2006