2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Anr 28, 2005 08:00 AM

1. Entity Nam W M P, IN	۷C			Secretary of State
Principal Place 1497 NW 7 S MIAMI, FL 33	ST	Mailing Address 1497 NW 7 ST MIAMI, FL 33125		
D	O NOT WRITE		CE	04192005 No Chg-P CR2E034 (10/03) 4. FEI Number
PALLEY, SHELDON B 1497 NW 7 ST MIAMI, FL 33125 IN THIS SPACE				
8. 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 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent another if applicable INOTE Registered Agent signature required when relatitating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10. TITLE NAME STREET ADDRESS CITY ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DP MUNACH, GLENN J 1497 NW 7 ST MIAMI, FL 33125 DST WHITE, JOHN 1497 NW 7 ST MIAMI, FL 33125	DIRECTORS		U00000338000 04/28/05-80019-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP		· ,	Service	DO NOT WRITE -IN THIS SPACE
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 of the receiver or trustee employed by 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 arrattachment wherein address, with all other like empowered. SIGNATURE:				

TURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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