

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000008915 1. Entity Name WIG FIX INC.		
Principal Place of Business 928 NO MILLS AVE. ORLANDO, FL 32803	MAILING ADDRESS 928 NO MILLS AVE. ORLANDO, FL 32803	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RIEDLEY, JOSEPH A JR 1704 NEBRASKA ST. ORLANDO, FL 32803		DO NOT WRITE 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. I am familiar with and accept the obligations of registered agent.		
SIGNATURE _____ DATE _____ Signature must be in ink and name of registered agent and New Employees (NOTE: Registered Agent signature required when filing Marking)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Third Party Contribution ☐ \$5.00 May Be Added to Filing
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY ST ZIP	PT RIEDLEY, JOSEPH A JR 1704 NEBRASKA ST ORLANDO, FL 32803	
TITLE NAME STREET ADDRESS CITY ST ZIP	VS FUGATE, MARTIN A 1704 NEBRASKA SR ORLANDO, FL 32803	
TITLE NAME STREET ADDRESS CITY ST ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Joseph A Riedley</u> <u>4-2806</u> SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR		



04252006 No Chg-P CR25034 (11/05)

4. FEI Number 01-0596899	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

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05/15/06-80023-011 150.00

**DO NOT WRITE
IN THIS SPACE**