

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90019 004 ***150.00

DOCUMENT # P02000013072	
1. Entity Name OSCAR WEGNER ENTERPRISES, INC.	

Principal Place of Business 2056 SUNSET PT RD 22 CLEARWATER, FL 33765	Mailing Address 2056 SUNSET PT RD 22 CLEARWATER, FL 33765
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

05122004 Chg-P CR2E034 (10/03)

4. FEI Number 02-0553845	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WEGNER, OSCAR E 2056 SUNSET PT RD 22 CLEARWATER, FL 33765	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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.

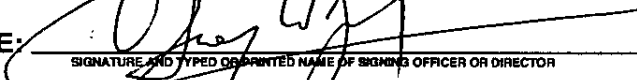
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST WEGNER, OSCAR E 2056 SUNSET PT RD CLEARWATER, FL 33765 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2054 Sunset Point Rd # 34 Clearwater, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** Date **5/14/04** Daytime Phone # _____

ATTACHMENT 24076347
PO2000013072

Elizabeth Coppoli Enterprises, Inc.

1700 Ridgeway Drive
Clearwater, FL 33755
727-441-8287 * fax 603-658-1350

May 14, 2004

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: 2004 Annual Report
FEIN: 02-0553845
Oscar Wegner Enterprises, Inc.

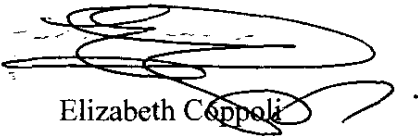
Dear Sir or Madam,

Enclosed is this year's Annual Report and a check for \$150.

We are requesting that the penalty of \$400 be waived. My client did not receive the postcard your office forwarded for renewal and therefore was unable to make the May 1st deadline.

As you can see, at first realization that this had occurred, he has requested me to help him to make good on the renewal as soon as possible.

Respectfully,


Elizabeth Coppoli