2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 08:00 AN Secretary of State

	AMMOAL	REPORT	10 mm	Časvátsky of Ctata	
DOCUMENT # P02000039316 1. Entity Name WWCG INCORPORATED		Secretary of Stat			
Principal Plac		Mailing Address			
11490 N.W.	23 ST IGS, FL 33065	11490 N.W. 23 ST CORAL SPRINGS, FL 33065			
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				_ \$8.75 additional	
		<u>in the state of t</u>	<u> المناف المناف</u>	5. Certificate of Status Desired Fee Required	
	6. Name and Address of Current R	egistered Agent	-		
BJORSVIK	CIAN			DO NOT WRITE	
11490 N.W. 23 ST				DO NOT MULTE	
CORAL SPRINGS, FL 33065				IN THIS SPACE	
		<u> </u>		the second secon	
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.					
Bise collidations of registered agents.					
SIGNATURE					
Supplies What is best and reaches to displace the and size is abhit from the supplies on a reach supplies to the supplies to t					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND D	IRECTORS			
TITLE NAME	P BJORSVIK, BENGT				
STREET ADDRESS	11490 N.W. 23 ST				
CITY-ST-ZIP	CORAL SPRINGS, FL 33065			U00000152266 05/04/04-80080-005 158.75	
TITLE				U5/U4/U4-8UU8U-UU5 158./5	
NAME					
STREET ADDRESS CITY-ST-ZIP			1		
TITLE		<u></u>	1		
NAME			1		
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CITY-ST-ZIP		3.45	4		
TITLE NAME				IN THIS SPACE	
STREET ADDRESS			I		
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TITLE			1		
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STREET ADDRESS CITY-ST-ZIP					
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12. I hereby of	certify that the information supplied with to	his filing does not qualify for the exercise and accurate and that my sinns	emption stated in Se	ection 119.07(3)(i), Florida Statutes. I further certily that the information same legal effect as if made under path; that I am an officer or director	
12. I hereby certify that the information supplied with this filling 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.					