2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 09, 2007 8:00 am Secretary of State DOCUMENT # P03000005541 1. Entity Name 04-09-2007 90036 019 ***150.00 WFBM ENTERPRISES, INC. Principal Place of Business Mailing Address 4347 TAHITI DR. 4347 TAHITI DR HERNANDO BCH FL 34607-3234 HERNANDO BCH FL 34607-3234 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 55-0811733 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARKALOW, WILLIAM R 4347 TAHITI DR. HERNANDO BCH FL 34607-3234 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. the obligations of registered agent. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete THEF ☐ Change ☐ Addition YUNGMANN-BARKALOW, JANET A NAME 4347 TAHITI DR. STREET ADDRESS STREET ADORESS HERNANDO BCH FL 34607-3234 CITY-ST-ZIP CHY-ST-ZIP JASON Andrew YUNG MARK 518 Underwood Dr. VĎ THE Delete 9111 BARKALOW, WILLIAM R NAME NAME 4347 TAHITI DR. STREET ADDRESS STREET ADDRESS HERNANDO BCH FL 34607-3234 CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY - ST - ZIP ☐ Delete HILE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY S1-7IP CITY-ST ZIP TITLE Defete TITLE ☐ Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY ST-ZIP ☐ Defete IIIIE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes, I further certify that the information

indicated on this report or supplemental roport 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.

FILED