

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011979

FILED
Sep 08, 2004
Secretary of State

Entity Name: WANA MAINTENANCE SERVICES, INC.

Current Principal Place of Business:

2669 FOREST HILL BLVD #114
WEST PALM BEACH, FL 33406

New Principal Place of Business:

14901 S. BISCAYNE RIVER DR
MIAMI, FL 33168

Current Mailing Address:

2669 FOREST HILL BLVD #114
WEST PALM BEACH, FL 33406

New Mailing Address:

P.O. BOX 640914
MIAMI, FL 33164

FEI Number: 54-2093525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, NATANAEL
2669 FOREST HILL BLVD #114
WEST PALM BEACH, FL 33406

Name and Address of New Registered Agent:

SIMON, NATANAEL
14901 S. BISCAYNE RIVER DR
MIAMI, FL 33168

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.

SIGNATURE:

09/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIMON, NATANAEL
Address: PO BOX 640914
City-St-Zip: MIAMI, FL 331640914

Title: VD () Delete
Name: SIMON, WANEL
Address: 14901 S BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33164

Title: TD () Delete
Name: SIMON, GILBERTE
Address: 14901 S BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: SIMON, JOSEPH M
Address: 14901 S BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33168

Title: TD (X) Change () Addition
Name: SIMON, GILBERTE
Address: 14901 S BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33168

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATANAEL SIMON

PD

09/08/2004

Electronic Signature of Signing Officer or Director

Date