

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000011979

**FILED**  
**May 05, 2008**  
**Secretary of State**

**Entity Name:** WANA MAINTENANCE SERVICES, INC.

**Current Principal Place of Business:**

36 SW 16 ST.  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

11431 SAGE MEADOW TERR.  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

36 SW 16 ST.  
HOLLYWOOD, FL 33020

**New Mailing Address:**

11431 SAGE MEADOW TERR.  
ROYAL PALM BEACH, FL 33411

**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  
11431 SAGE MEADOW TERR.  
ROYAL PALM BEACH, FL 33411 US

**Name and Address of New Registered Agent:**

SIMON SANON, SARA  
11431 SAGE MEADOW TERR.  
ROYAL PALM BEACH, FL 33411 US

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: SARA SIMON SANON

05/05/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIMON, NATANAEL  
Address: 11431 SAGE MEADOW TERR.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP ( ) Delete  
Name: SIMON, JOSEPH M  
Address: 11431 SAGE MEADOW TERR.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T (X) Delete  
Name: GILBERTE, SIMON  
Address: 11431 SAGE MEADOW TERR.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SIMON SANON, SARA  
Address: 11431 SAGE MEADOW TERR.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP (X) Change ( ) Addition  
Name: GILBERTE, SIMON  
Address: 11431 SAGE MEADOW TERR.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SARA SIMON SANON

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date