


2005 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 8:00 am
Secretary of State

01-10-2005 90012 008 ***150.00

DOCUMENT # P03000066029

1. Entity Name
 WYNWOOD DEVELOPMENT, CORP. III



Principal Place of Business
 2801 NW 3RD AVENUE
 MIAMI, FL 33128

Mailing Address
 2801 NW 3RD AVENUE
 MIAMI, FL 33128

50000793

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



01042005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent
 CAMACHO, CESAR R
 240-EAST-FLAGLER-STREET
 MIAMI, FL 33131

7. Name and Address of New Registered Agent
 Name: **DAVID WECK**
 Street Address (P.O. Box Numbers Not Acceptable): **2801 NW 3 Ave**
 City: **MIAMI** FL Zip Code: **33127**

4. FEI Number
 APPLIED FOR 16-1678660

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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: *Cesar R Camacho* DATE: **1/7/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD WECK, DAVID 2801 NW 3RD AVENUE MIAMI, FL 33128 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD WECK, ELENA 2801 NW 3RD AVENUE MIAMI, FL 33128 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *David Weck* PR95. DATE: **1/7/05** DAYTIME PHONE #: **(305) 573-0163**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #