

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 20, 2008  
Secretary of State**

DOCUMENT# P03000138868

Entity Name: WONORA FINANCIAL, INC.

**Current Principal Place of Business:**

3475 SHERIDAN STREET  
SUITE 209  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

**Current Mailing Address:**

3475 SHERIDAN STREET  
SUITE 209  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

FEI Number: 61-1460743      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARONOW, DAVID  
3475 SHERIDAN STREET  
SUITE 209  
HOLLYWOOD, FL 33021 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ARONOW, DAVID  
Address: 9533 CARLYLE AVENUE  
City-St-Zip: SURFSIDE, FL 33154

Title: VP (X) Delete  
Name: CLAYTON, JAMES W  
Address: 3801 SOUTH OCEAN DRIVE APT.2E  
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP (X) Delete  
Name: BUSH, JUSTIN M  
Address: 3801 SOUTH OCEAN DRIVE APT.2E  
City-St-Zip: HOLLYWOOD, FL 33019

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

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

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

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: DAVID ARONOW

PR

06/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date