## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000148855

Entity Name: W & G SERVICES INC.

FILED May 02, 2008 Secretary of State

Current Pi	rincipal Place of B	usiness:	New Princ	ipal Place of Business:	
1661 PALN APOPKA, I	/I BEACH DRIVE FL 32712 US				
Current Mailing Address:			New Maili	New Mailing Address:	
1661 PALN APOPKA, I	M BEACH DRIVE FL 32712 US				
FEI Number:	20-0471333 FEI	Number Applied For()	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and	Address of Currer	nt Registered Agent:	Name and	Address of New Registered Agent:	
	IAS, WANDA C 1/1 BEACH DRIVE FL 32712 US				
	named entity submi e of Florida.	ts this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic Sig	nature of Registered Age	ent	Date	
	, ,, ,	F.S., the corporation did no	t receive the prior notic	e.	
	npaign Financing Trust  S AND DIRECTORS	• •	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address: City-St-Zip:	P ( ) Delete COROMINAS, GERSC 1661 PALM BEACH DI APOPKA, FL 32712 U	N R RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	VP ( ) Delete COROMINAS, WANDA 1661 PALM BEACH DI APOPKA, FL 32712 U	CSR RIVE	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition LUCIANO, JOSE R MR 402 CHINAHILL CT APOPKA, FL 32712 US	
Fitle: Name: Address: City-St-Zip:	()Delete		Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition LUCIANO, ALTAGRACIA A MRS 402 CHINAHILL CT. APOPKA, FL 32702 OR	
Fitle: Name: Address: City-St-Zip:	()Delete	•	Title: Name: Address: City-St-Zip:	T () Change (X) Addition DURAN, FELIPE MR 402 CHINAHILL CT APOPKA, FL 32712	
only of 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: GERSON COROMINAS P 05/02/2008