## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 28, 2005 8:00 am Secretary of State

NAME FRIEDMAN, RONALD S NAME STREET ADDRESS 10080 NW 14TH STREET STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322 CITY-ST-ZIP	1. Entity Nam	MENT-# P0400007856 WE ACQUISTION CORPORATION	_ 03-28-2005 90063 039 ***150.00					
PLANTATION, FL 33324  2. Principal Place of Business 2777 FC CALLED GOL AND State  Suite, Apt. W, etc.  City & State  City & State  City & State  Country  Country  S. Certificate of Status Desired  S. Teet Address of New Registered Agent  Name  FEINSTEIN, MICHAEL L ESO.  888 E. LAS OLAS BLVD.  SUITE 700 0'  FT. LAUDERDALE, FL 33301  City  Street Address (P.O. Box Number is Not Acceptable)  City  FL Address of New Registered Agent  City  FL Address (P.O. Box Number is Not Acceptable)  Sireet Address of Policy and Address of New Registered Agent  Name  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  P. Election Campaign Financing Trust Fund Contribution.  Added to Fees  Int.  Name  FRIEDMAN, RONALD S  Titte FRIEDMAN, RONALD S  SIREET ADDRESS  TO Belde  Int.  Name  TAUBMAN, ANDREW S  SIREET ADDRESS  T73 VERONA LAKE DRIVE  Suite, Apt. W, etc.  Country  Country  S. Certificate of Status Desired  S. Certificate of Status Desired o			-		1 3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Suite, Api. #, etc.    Suite, Api. #, etc.							(FO) () (9 F)	
City & State  City & State  City & State  Country  Country  Country  S. Certificate of Status Desired S8.75 Additional Fee Required Fee Address (P.O. Box Number is Not Acceptable)  City FL	2787 E OAKLUD BOK BWD		SAHE					
Country   Zip   Country   Zip   Country   S. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Additiona	Suite, Apt."	#, elc	Suite, Apt. #, etc	1	02182005	CR2E034 (10/03)	n the 🕳 i	
Country  Country  S. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Add			City & State			_		
6. Name and Address of Current Registered Agent  FEINSTEIN, MICHAEL L ESQ. 888 E. LAS OLAS BLVD. SUITE 700  FT. LAUDERDALE, FL 33301  City  FL   Aud Crists  Cit			Zip	Country		d □ \$8.75 Add	litional	
FEINSTEIN, MICHAEL LESQ. 888 E. LAS OLAS BLVD. SUITE 700 FT. LAUDERDALE, FL 33301  City FL   Augustus of Fluid Control the obligations of registered agent.  SIGNATURE Signature, hosed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agratium after inspirature required when remaining)  FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  INVESTMENT ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322  CITY-ST-ZIP TAUBMAN, ANDREWS STREET ADDRESS STREET ADDRE		6. Name and Address of Current Regis	tered Agent		7. Name and Address of Nev	<del></del>		
SUITE 700  FT. LAUDERDALE, FL 33301  City  FL Ziu Crotio  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 Familian with at 3 fc. the obligations of registered agent.  SIGNATURE    Signature, hold or printed name of registered agent and trib if applicable (NOTE; Registered Agent signature required when remtaturing)    Signature   Signature, hold or printed name of registered agent and trib if applicable (NOTE; Registered Agent signature required when remtaturing)    Signature   Signature, hold or printed name of registered agent and trib if applicable (NOTE; Registered Agent signature required when remtaturing)    Signature   Signature, hold or printed name of registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the color of the purpose of the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the purpose of changing its registered agent, or both, in the State of Florida Familian and a 3 fc. the purpose of the purpos	FEINSTEI	N, MICHAEL L ESQ.						
City				Street Address	(P.O. Box Number is Not Accepta	role)		
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 Ficance in an imminishment and its contribution of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and little in an imminishment and applicable in the purpose of changing its registered agent, or both, in the State of Ficance in an imminishment and its contribution of registered agent, or both, in the State of Ficance in an imminishment and its contribution of the purpose of changing its registered agent, or both, in the State of Ficance in an imminishment and its contribution.    Signature, typed or printed name of registered agent and little in the purpose of changing its registered agent, or both, in the State of Ficance in an imminishment in the State of Ficance in an imminishment and its contribution.    Signature, typed or printed name of registered agent and little in the state of Ficance in an imminishment and its contribution.    Signature, typed or printed name of registered agent and little in the State of Ficance in an imminishment and its contribution.    Signature, typed or printed name of registered agent and little in the State of Ficance in an imminishment and its contribution.    Signature, typed or printed name of registered agent and little in the State of Ficance in the state	FT. LAUDERDALE, FL 33301				-		!	
the obligations of registered agent.  SIGNATURE    Signature, typeed or printed name of registered agent and little if applicable.   (NOTE: Repictored Agent signature required when rematating)   SATE    FILE NOW!!! FEE IS \$150.00   After May 1, 2005 Fee will be \$550.00   Trust Fund Contribution.   S5.00 May Be Added to Fees				City .		FL   Zip Cod	· !	
SIGNATURE   Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)   Source	the obligat	ions of registered agent.	ourpose of changing its re-	gistered office or regist	ered agent, or both, in the State of	Florida I am tambar with	at I topical	
After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution. Added to Fees  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE PRES Delete TITLE NAME  STREET ADDRESS 10080 NW 14TH STREET  CITY-ST-ZIP PLANTATION, FL 33322  TITLE VP Delete TITLE  NAME TAUBMAN, ANDREW S  STREET ADDRESS 773 VERONA LAKE DRIVE STREET ADDRESS  STREET ADDRESS STREET ADDRESS STREET ADDRESS  STREET ADDRESS STREET ADDRESS STREET ADDRESS  STREET ADDRESS STREET ADDRESS STREET ADDRESS	SIGNATURE							
TITLE PRES Delete TITLE ADDRESS 10080 NW 14TH STREET STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322 CITY-ST-ZIP  TITLE VP Delete TITLE ADDRESS TABBET ADDRESS STREET ADDRESS					5.00 May Be ided to Fees	Control of the Contro		
NAME FRIEDMAN, RONALD S STREET ADDRESS CITY-ST-ZIP TITLE NAME TAUBMAN, ANDREW S STREET ADDRESS TREET ADDRESS					ADDITIONS/CHANGES TO C	FFICERS AND DIRECTOR	S IN 11	
TITLE VP Delete TITLE CHANGE Add NAME TAUBMAN, ANDREWS NAME STREET ADDRESS 773 VERONA LAKE DRIVE STREET ADDRESS	NAME STREET ADDRESS	FRIEDMAN, RONALD S 10080 NW 14TH STREET	□ Defete	NAME: Street address		☐ Change	Addition	
CITY-ST-ZIP   WESTON, FL 33326	NAME STREET ADDRESS	VP TAUBMAN, ANDREW S 773 VERONA LAKE DRIVE	Delete -	TITLE NAME STREET ADDRESS		☐ Change	Addition	
	TITLE .	SEC	☐ Delete	TITLE NAME	-	☐ Change	Addition	
CITY-ST-ZIP WESTON, FL 33326 CITY-ST-ZIP			<b>C</b>					
TITLE TREA Delete TITLE Change Add  NAME TAUBMAN, ANDREWS  STREET ADDRESS  CITY-S1-ZIP WESTON, FL 33326  TREA DELETE TOTRES STREET ADDRESS  CITY-S1-ZIP	NAME STREET ADDRESS	TAUBMAN, ANDREW S 773 VERONA LAKE DRIVE	∟ Delete	NAME STREET ADDRESS		∐ Change	Addition Addition	
TITLE         Delete         TITLE         Change         Add           NAME         NAME         STREET ADDRESS	NAME		☐ Delete	NAME		☐ Change	Addition	
CITY-ST-ZIP CITY-ST-ZIP								
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  12. 1 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 direct	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		_ `	Addition	