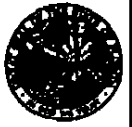


FILED
Sep 12, 2005 8:00 am
Secretary of State

08-09-2005 90004 032 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000079078			
1. Entity Name WGR ENTERPRISES, INC.			
Principal Place of Business 773 FITCH DRIVE WEST PALM BEACH, FL 33415		Mailing Address 773 FITCH DRIVE WEST PALM BEACH, FL 33415	
2. Principal Place of Business WEST PALM BCH FLA.		3. Mailing Address 773 Fitch Dr	
Suite, Apt. #, etc. HM		Suite, Apt. #, etc.	
City & State WEST PALM BCH FL		City & State WPB FLA	
4. FEI Number 20-1149658		Applied For Not Applicable	
Zip 33415		Country FL	
Country W Palm Bch		Country W Palm Bch	
5. Name and Address of Current Registered Agent RICHARDSON, WALTER 773 FITCH DRIVE WEST PALM BEACH, FL 33415		6. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-electing)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D RICHARDSON, WALTER <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDSON, WALTER	NAME	
STREET ADDRESS	773 FITCH DRIVE	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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: <u>Walter Richardson</u>		8/4/05	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	

66027197



07262005 Chg-P CR2E034 (10/03)

FL

ATTACHMENT

PO4000079078

66027197

W.G.R. Enterprise Inc.

Please excuse the tardyness
of this payment.

I am a new corporation and
received no notice of this fee.

Sincerely

8-3-2005

Walter Richardson

Walter G. Richardson

773 Fitch Drive

West Palm Beach, Fla.

33415



ATTACHMENT

66027197

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 10, 2005

WGR ENTERPRISES, INC.
773 FITCH DRIVE
WEST PALM BEACH, FL 33415

Subject: **WGR ENTERPRISES, INC.**

Reference Number: **P04000079078**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION