

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P04000089769

1. Entity Name:

WILSON GROUP ENTERPRISES, INC.


 FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 SEP -6 PM 1:29

DO NOT WRITE IN THIS SPACE

 2. Principal Place of Business  
 8726 Hyaleah Road  
 Suite, Apt. 2, etc.

 3. Mailing Address  
 8726 Hyaleah Road  
 Suite, Apt. 2, etc.

DO NOT WRITE IN THIS SPACE

 City & State  
 Tampa, Florida

 City & State  
 Tampa, Florida

 4. FEI Number  
 20-1233918

 Applied For  
 Not Applicable

 Zip  
 33617

Country

 Zip  
 33617

Country

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

7. Name and Address of Current Registered Agent

Name SPIEGEL &amp; UTRERA, P.A.

Street Address (P.O. Box Number is Not Acceptable)

1840 Southwest 22 Street, 4th Floor

City Miami

FL

 Zip Code  
 33145
DO NOT WRITE  
IN THIS SPACE

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

Signature must be accompanied by a statement of the registered agent and the entity.

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Signature

 January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$350.00  
 Amended UBR is \$61.25  
 Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

|                                                   |                                                                       |                                                   |                                               |
|---------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | PTD<br>Wilson, Elgrin L.<br>8726 Hyleah Road<br>Tampa, Florida 33617  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | 500079713725<br>09/12/06--01022--002 **150.00 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | VSD<br>Wilson, Ame-Noelle<br>8726 Hyleah Road<br>Tampa, Florida 33617 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | DO NOT WRITE<br>IN THIS SPACE                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                                                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP |                                               |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(a), Florida Statutes. I further certify that the information indicated on this report is supplemental report is true and correct, 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 shareholder or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other like endorsements.

SIGNATURE:

Elgrin L. Wilson, Pres.

8/28/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature

CR2E346 (1/2001)

**AFFIDAVIT IN SUPPORT OF REQUEST TO  
WAIVE THE FLORIDA DEPARTMENT OF STATE  
CORPORATE REINSTATEMENT FEES**

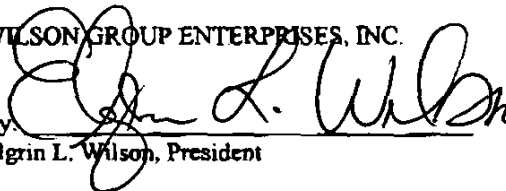
STATE OF FLORIDA                     )  
                                                      )  
COUNTY OF HILLSBOROUGH        )

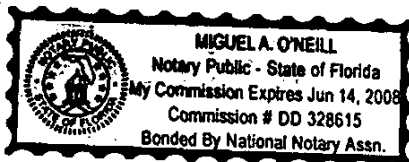
1. Elgrin L. Wilson is the President of WILSON GROUP ENTERPRISES, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation failed to file its 2006 Annual Report or pay the 2006 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
  - 2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
  - 2.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment of its 2006 Annual Report fee and the filing of its 2006 Annual Report, which are presented simultaneously with this Affidavit.
4. WILSON GROUP ENTERPRISES, INC. satisfies the requirements of the Florida Statutes 607.0401.
5. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 29 day of August, 2006

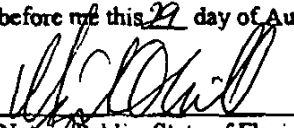
**FURTHER, AFFIANT SAYETH NOT**

WILSON GROUP ENTERPRISES, INC.

By   
Elgrin L. Wilson, President



**SWORN AND SUBSCRIBED**  
before me this 29 day of August, 2006

  
Notary Public, State of Florida at Large  
Printed Name: Miguel O'Neill  
Commission Expires: June 14, 2008