

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099670

FILED  
Feb 18, 2006  
Secretary of State

Entity Name: W.E. BROTHERS ENTERPRISES INC.

## Current Principal Place of Business:

1344 S. KILLIAN DRIVE  
STE 1  
LAKE PARK, FL 33403

## New Principal Place of Business:

4383 BAMBOO DRIVE  
PALM BEACH GARDENS, FL 33410

## Current Mailing Address:

P O BOX 530743  
LAKE PARK, FL 33403

## New Mailing Address:

FEI Number: 73-1711049      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PKWY STE 300  
TAMPA, FL 336372087 US

## Name and Address of New Registered Agent:

JOSEPH, WANDA L  
4383 BAMBOO DRIVE  
PALM BEACH GARDENS, FL 33410 US

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: WANDA L JOSEPH

02/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JOSEPH, WANDA L  
Address: 4383 BAMBOO DR  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: P ( ) Delete  
Name: JOSEPH, WENDOL  
Address: 4383 BAMBOO DRIVE  
City-St-Zip: PALM BCH GADNS, FL 33410

Title: VP ( ) Delete  
Name: BLAISE, ESPRADU  
Address: 12420 NE 2ND AVENUE  
City-St-Zip: MIAMI, FL 33161

Title: SECY ( ) Delete  
Name: JOSEPH, WANDA L  
Address: 4383 BAMBOO DRIVE  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: TRES ( ) Delete  
Name: JOSEPH, WANDA L  
Address: 4383 BAMBOO DRIVE  
City-St-Zip: PALM BCH GDNS, FL 33410

## 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:

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 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: WANDA L JOSEPH

DIR

02/18/2006

Electronic Signature of Signing Officer or Director

Date