2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137318

Entity Name: WONDER LIFE ENTERPRISES, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5401 COLLINS AVE 5901 NW 151 ST STE CUJJB 5901 NW 151 ST

MIAMI BEACH, FL 33140 MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

5401 COLLINS AVE 5901 NW 151 ST STE CUJJB 5901 NW 151 ST

MIAMI BEACH, FL 33140 MIAMI LAKES, FL 33014

FEI Number: 06-1733334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANCHO QUINTERO, JENILEISS
5401 COLLINS AVE
STE CUJJB

SANCHO QUINTERO, JENILEISS
5901 NW 151 ST
SUITE 103

MIAMI BEACH, FL 33140 US MIAMI LAKES, FL 33014 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: JENILEISS SANCHO QUINTERO 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: () Change () Addition Name: COHEN, VIOLETA Name:

 Address:
 1311 NE 19TH PL
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:

Title: Title: (X) Change () Addition () Delete SANCHO QUINTERO, JENILEISS Name: SANCHO QUINTERO, JENILEISS Name: 5401 COLLINS AVE STE CUJJB 5901 NW 151 ST SUITE 103 Address: Address: MIAMI BEACH, FL 33140 MIAMI LAKES, FL 33014 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: VΡ ZALDIVAR, MIGUEL ORTEGA, GUILLERMO Name: Name: 15242 NW 88 PL 5901 NW 151 ST SUITE 103 Address: Address: City-St-Zip: MIAMI LAKES, FL 33018 City-St-Zip: MIAMI LAKES, FL 33014

Title: ST (X) Delete Title: () Change () Addition

 Name:
 ORTEGA, GUILLERMO
 Name:

 Address:
 5333 COLLINS AVE APT 406
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-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: JENILEISS SANCHO QUINTERO P 04/30/2007