


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90360 013 \*\*\*150.00

<b>DOCUMENT # P04000137318</b>	
1. Entity Name <b>WONDER LIFE ENTERPRISES, INC.</b>	

Principal Place of Business <b>5901 NW 151 ST SUITE 103 MIAMI LAKES, FL 33014</b>	Mailing Address <b>5901 NW 151 ST SUITE 103 MIAMI LAKES, FL 33014</b>
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40080204



2. Principal Place of Business - No P.O. Box # <b>15476 NW 77th Court</b>	3. Mailing Address <b>15476 NW 77th Court</b>
Suite, Apt. #, etc. <b>Suite #174</b>	Suite, Apt. #, etc. <b>Suite #174</b>
City & State <b>Miami Lakes FL</b>	City & State <b>Miami Lakes FL</b>
Zip <b>33016</b>	Country <b>Dade</b>

04162008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent <b>SANCHO QUINTERO, JENILEISS 5901 NW 151 ST SUITE 103 MIAMI LAKES, FL 33014</b>	
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7. Name and Address of New Registered Agent Name <b>Jenileiss Sancho Quintero</b> Street Address (P.O. Box Number is Not Acceptable) <b>15476 NW 77th Court suite #174</b> City <b>Miami Lakes</b> FL Zip Code <b>33016</b>	
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 <b>Jenileiss Sancho Quintero President</b> DATE <b>04/23/08</b>	

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SANCHO QUINTERO, JENILEISS 5901 NW 151 ST SUITE 103 MIAMI LAKES, FL 33014</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <b>Jenileiss Sancho Quintero President</b> DATE <b>04/23/08</b> DAYTIME PHONE # <b>305 506 7377</b>	