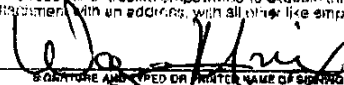


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90089 014 ***155.00

DOCUMENT # P04000160229					
1. Entity Name WAYMAR GROUP INC.					
Principal Place of Business 2389 SEAFOOD DR WEST PALM BEACH, FL 33414			Mailing Address 2389 SEAFOOD DR WEST PALM BEACH, FL 33414		
2. Principal Place of Business 1332 LAKEWORTH RD		3. Mailing Address 1332 LAK WORTH RD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05032005 Chg-P CR2E034 (10/03)	
City & State LAKEWORTH FL 33467		City & State LAKE WORTH FL 33467		FBI Number 35-224-5152	
Zip 33467		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			7. Name and Address of New Registered Agent Name: WAYNE MINIX Street Address (P.O. Box Number is Not Acceptable): City: FL 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: _____ Signature, typed or printed name of registered agent and date of application. (NOTE: Reg. Agent signature required when incorporated.) DATE: _____					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees:		
10. OFFICERS AND DIRECTORS					
TITLE	PSD ☐ Delete				
NAME	SELINGER, MARK				
STREET ADDRESS	2389 SEAFOOD DR				
CITY-ST-ZIP	WEST PALM BEACH, FL 33414				
TITLE	VT ☐ Delete				
NAME	MINIX, WAYNE				
STREET ADDRESS	2389 SEAFOOD DR				
CITY-ST-ZIP	WEST PALM BEACH, FL 33414				
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information disclosed 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 empowering 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:  Wayne Minix SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
x4-29-05 x561-439-0161					