

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007349

FILED
Apr 08, 2008
Secretary of State

Entity Name: AERIFICATION BY WEIBE INC.

Current Principal Place of Business:

12220 HAZEN AVENUE
THONOTOSASSA, FL 33592 US

New Principal Place of Business:

12216 HAZEN AVENUE
THONOTOSASSA, FL 33592 US

Current Mailing Address:

P O BOX 291370
TAMPA, FL 33687 US

New Mailing Address:

P O BOX 399
THONOTOSASSA, FL 33592 US

FEI Number: 20-2161399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARNEY, CYNTHIA
10905 GILLETTE AVENUE
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

VARNEY, RUSSELL E PRES
12216 HAZEN AVENUE
THONOTOSASSA, FL 33592 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: RUSSELL E VARNEY

04/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: VARNEY, RUSSELL E
Address: P O BOX 291370
City-St-Zip: TAMPA, FL 33687 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: VARNEY, RUSSELL E
Address: 10905 GILLETTE AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617 US

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: RUSSELL E VARNEY

PRES

04/08/2008

Electronic Signature of Signing Officer or Director

Date