2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# P05000082654

Entity Name: W.A.Y. ENTERPRISES, CORP.

Current Principal Place of Business:

20022 N W 66TH PL
MIAMI, FL 33015

New Principal Place of Business:

3701 N. COUNTRY CLUB DRIVE # 502
AVENTURA, FL 33180

Current Mailing Address:

20022 N W 66TH PL
MIAMI, FL 33015

New Mailing Address:

3701 N. COUNTRY CLUB DRIVE # 592
AVENTURA, FL 33180

FEI Number: 20-2974161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YUSTI, WILVER ANTONIO
20022 N W 66TH PL
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

TRELLES, ARSENIO L
312 SPRINGDALE CIRCLE
PALM SPRINGS, FL 33461 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: ARSENIO TRELLES 04/11/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: BOTERO, ANDRES F
Address: 20022 N W 66TH PL
City-St-Zip: MIAMI, FL 33015

Title: S (X) Delete
Name: MENDOZA, ALVARO
Address: 20022 N W 66TH PL
City-St-Zip: MIAMI, FL 33015

Title: S (X) Delete
Name: DAHEZA, DAMIAN G
Address: 20022 NW 66TH PL.
City-St-Zip: MIAMI, FL 33015

Title: S (X) Delete
Name: JARAMILLO, JAVIER
Address: 20022 NW 66TH PL
City-St-Zip: MIAMI, FL 33015

Title: T (X) Delete
Name: SANDEZ, HENRY
Address: 20022 NW 66TH PL
City-St-Zip: MIAMI, FL 33015

Title: S (X) Delete
Name: CASTANO, JULIO J
Address: 20022 NW 66 PL
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TRELLES, ARSENIO L
Address: 312 SPRINGDALE CIRCLE
City-St-Zip: PALM SPRINGS, FL 33461

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 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: ARSENIO TRELLES P 04/11/2008
Electronic Signature of Signing Officer or Director Date