

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P05000104801

1. Entity Name  
THE WAJE GROUP, INC.



Principal Place of Business  
1410 CHESTERFIELD COURT  
EUSTIS, FL 32726

Mailing Address  
1410 CHESTERFIELD COURT  
EUSTIS, FL 32726

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

01122006 Chg-P CR2E034 (11/05)



4. FEI Number  
**16-1729025**  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BRASWELL, EDDIE R  
1410 CHESTERFIELD COURT  
EUSTIS, FL 32726

Name

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 title if applicable.

(NOTE: Registered Agent signature required when remitting)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P  
NAME: BRASWELL, WENDY W  
STREET ADDRESS: 1410 CHESTERFIELD COURT  
CITY-ST-ZIP: EUSTIS, FL 32726

Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE: VP  
NAME: BRASWELL, EDDIE R  
STREET ADDRESS: 1410 CHESTERFIELD COURT  
CITY-ST-ZIP: EUSTIS, FL 32726

Delete

TITLE:  Change  Addition  
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STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

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CITY-ST-ZIP:  Change  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: *Wendy W. Braswell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/06 352-483-0616

Date

Daytime Phone #

*Wendy W. Braswell*