## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000015173

Entity Name: WEELEZ INC

FILED Apr 08, 2009 Secretary of State

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:			
	ANDING BLVE PARK, FL 3206						
Current Ma	ailing Addres	s:	New Mailing Address:				
	NING SUN DR IRG, FL 32068						
FEI Number:	20-4231831	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired	I()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	lew Registered Agent:		
738 CHES	CHRISTOPHE TWOOD CHAS PARK, FL 3206	SE DR	LASAUCE, CHRISTOPHER 3240 CARLOTTA RD MIDDLEBURG, FL 32068 US				
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered o	ffice or registered agent, o	or both,	
SIGNATUR	RE:			04/08/2009			
	Electroni	c Signature of Registered Age	nt		Date		
Election Carr	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () MCLEOD, JAME 3021 MORNING MIDDLEBURG, I	SUN DR	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V () LASAUCE, CHR 2329 OAK POIN MIDDLEBURG,	T TERRACE	Title: Name: Address: City-St-Zip:	V (X) LASAUCE, CHR 3240 CARLOTT MIDDLEBURG,	A RD		
Title: Name: Address: City-St-Zip:	S () MCLEOD, JAME 3021 MORNING MIDDLEBURG, I	SUN DR	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	T () MCLEOD, JAME 3021 MORNING MIDDLEBURG,	SUN DR	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition		

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: CHRISTOPHER LASAUCE V.P. 04/08/2009