

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092817

FILED
Mar 23, 2007
Secretary of State

Entity Name: PLEASE WISH ME, UNLTD., INC.

Current Principal Place of Business:

6116 NW 246TH AVE.
ALACHUA, FL 32615 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 467
LA CROSSE, FL 32658 US

New Mailing Address:

FEI Number: 59-1704225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, WAYNE O
6116 NW 246TH AVE.
ALACHUA, FL 32615 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HARVEY, WAYNE O
Address: P.O. BOX 467
City-St-Zip: LA CROSSE, FL 32658 US

Title: VP () Delete
Name: HARVEY, ALEXANDRA J
Address: P.O. BOX 467
City-St-Zip: LA CROSSE, FL 32658 US

Title: SEC () Delete
Name: HARVEY, SCOTT R
Address: 406 EAGLE RIDGE DR.
City-St-Zip: BIRMINGHAM, AL 35242 US

Title: TREA () Delete
Name: HARVEY, HENRY W
Address: P.O. BOX 490853
City-St-Zip: LEESBURG, FL 34749 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: WAYNE HARVEY

PRES

03/23/2007

Electronic Signature of Signing Officer or Director

Date