2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050161

FILED Mar 24, 2009 Secretary of State

Entity Name: WISE INTERNATIONAL EDUCATION COMPANY, INC.				
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	NOLIA STREET E BEACH, FL 32937			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
	NOLIA STREET E BEACH, FL 32937			
FEI Number:	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
WILKINSON, MIRIAM S 3556 OAK HILL TRAIL TALLAHASSEE, FL 32312 US		3556 OAK HÍLL TRAIL	WILKINSON, MIRIAM S ESQ 3556 OAK HILL TRAIL TALLAHASSEE, FL 32312 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: MIRIAM S. WILKINSON, ESQ			03/24/2009	
Electronic Signature of Registered Agent		gent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DIR () Delete SHENG, WANG SONGSHANGU DI SAN YIN SHUA CHANG 462 REPUBIC OF CHINA 024005,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete WEI, LI 260 MAGNOLIA STREET SATELLITE BEACH, FL 32937 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () Delete WILKINSON, ROBERT E DR. 260 MAGNOLIA STREET SATELLITE BEACH, FL 32937 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DIR () Delete WILKINSON, CECELIA E	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: MIRIAM S. WILKINSON, ESQ RΑ 03/24/2009

260 MAGNOLIA STREET

SATELLITE BEACH, FL 32937

Address:

City-St-Zip: