2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000039332

Entity Name: WAC OF SOUTH FLORIDA, INC.

FILED Jun 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1415 WEST CYPRESS CREEK ROAD SUITE 210 1415 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309

FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

1415 WEST CYPRESS CREEK ROAD
SUITE 210
FORT LAUDERDALE, FL 33309

1415 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33309

FEI Number: 65-0740689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALTSCHUL, GARY

1415 WEST CYPRESS CREEK ROAD
SUITE 210
FORT LAUDERDALE, FL 33309 US

ALTSCHUL, GARY
1415 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33309 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: 06/24/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 ALTSCHUL, KEN
 Name:

 Address:
 16 VERONA COURT
 Address:

 City-St-Zip:
 NEW CITY, NY 10956
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 ALTSCHUL, GARY
 Name:

 Address:
 1415 WEST CYPRESS CREEK ROAD #210
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33309
 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: GARY ALTSCHUL S 06/24/2009