2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000022073

Entity Name: WOW PROVIDERS, INC.

FILED Jan 31, 2011 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 467 LAKESIDE CIRCLE SUNRISE, FL 33326 **Current Mailing Address: New Mailing Address:** 467 LAKESIDE CIRCLE SUNRISE, FL 33326 FEI Number: 27-2097981 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: PERGOLA, JOSEPH SR. 467 LAKESIDE CIRCLE SUNRISE, FL 33326 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 **OFFICERS AND DIRECTORS:**

Title:

Name: PERGOLA, JOSEPH SR Address: 467 LAKESIDE CIRCLE City-St-Zip: SUNRISE, FL 33326 US

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH PERGOLA PRES 01/31/2011