


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000064450	
1. Entity Name WELLCORP A EQUITY CORPORATION	

Principal Place of Business	Mailing Address
1500 W CYPRESS CREEK RD SUITE 409 FORT LAUDERDALE, FL 33309 US	C/O BRENNER REAL ESTATE 1500 W CYPRESS CREEK RD, STE. 409 FORT LAUDERDALE, FL 33309 US

DO NOT WRITE IN THIS SPACE



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0436726	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
SCHULTZ, MICHAEL E C/O BRENNER REAL ESTATE GROUP 1500 W CYPRESS CREEK RD, STE. 409 FORT LAUDERDALE, FL 33309

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	DPT
NAME	SCHULTZ, MICHAEL
STREET ADDRESS	2830 LONG MEADOW DR
CITY-ST-ZIP	WEST PALM BEACH, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/21/05-80069-004 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Michael E. Schultz</i> Michael E. Schultz	3/16/05	Date	Daytime Phone #
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