2007 FOR PROFIT CORPORATION

FILED Mar 12, 2007 08:00 AM **ANNUAL REPORT**

Secretary of State DOCUMENT # P94000060586 1. Entity Name WETHEROLE, INC. Principal Place of Business Mailing Address 3600 N.W. 37TH COURT 3600 N.W. 37TH COURT MIAMI, FL 331421 MIAMI, FL 33142 No Chg-P CR2E034 (11/05) 03072007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0429871 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MULLER, IVAN DO NOT WRITE 3600 N.W. 37TH COURT MIAMI, FL 33142 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) U00000662590 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П 03/21/07-80016-009 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MULLER, IVAN NAME 3600 N.W. 37TH COURT STREET ADDRESS MIAMI, FL 33142 CITY-ST-ZIP LITTE STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITEF STREET ADDRESS CITY-ST-ZIP NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 tike empowered.

SIGNATURE:

STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #