

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT.**

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000069669

1. Entity Name
WOLF HOLDINGS, INC.



Principal Place of Business
7350 NW 35TH TERR.
MIAMI, FL 33122 US

Mailing Address
7350 NW 35TH TERR.
MIAMI, FL 33122 US



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0531192	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLF, DAVID L MR
7350 NW 35TH TERR.
MIAMI, FL 33122

**DO NOT WRITE
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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000506024
04/27/06-80004-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	WOLF, DAVID
STREET ADDRESS	7350 NW 35TH TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	VST
NAME	WOLF JEFFREY
STREET ADDRESS	7350 NW 35TH TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/06

Date

305-477-0063

Daytime Phone #