


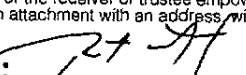


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000045575		
1. Entity Name W & A GROUP SERVICES, INC.		
Principal Place of Business 3111 UNIVERSITY DR SUITE 700 CORAL SPRINGS, FL 33065 US	Mailing Address 3111 UNIVERSITY DR SUITE 700 CORAL SPRINGS, FL 33065 US	 04182006 No Chg-P CR2E034 (11/05) 4. FEI Number 65-0596778 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WITZEL, ROBERT 7459 NW 34 STREET LAUDERHILL, FL 33319		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		 U00000536233 05/08/06-80086-002 150.00 DO NOT WRITE IN THIS SPACE
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WITZEL, ROBERT 7459 NW 34 ST FT LAUDERDALE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHMIDT, JOANNE M 9451 NW 44 PLACE CORAL SPRINGS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  ROBERT C. WITZEL		4/21/06 954-340-6670
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #