


FILE NOW: FILING FEE AFTER MAY 1ST IS: \$550.00

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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90185 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS													
DOCUMENT # P96000005310															
1. Corporation Name WE WOW THEM, INC.															
Principal Place of Business 300 SHEOAH BLVD APT 1107 WINTER SPRINGS FL 32708 US		Mailing Address 300 SHEOAH BLVD APT 1107 WINTER SPRINGS FL 32708 US													
2. Principal Place of Business 21 5864 Red Bug Lake Rd Suite, Apt. #, etc. 22 Winter Springs, Florida City & State 23 32708 USA Zip Country		2a. Mailing Address 26 4908 Petra Court Suite, Apt. #, etc. 27 Winter Spgs, Florida City & State 28 32708 USA Zip Country													
24 25		29 30													
9. Name and Address of Current Registered Agent MILLER, FRANK L III 330 SHEOAH BLVD APT 1107 WINTER SPRINGS FL 32708															
10. Name and Address of New Registered Agent 81 Name FRANK L. Miller III 82 Street Address (P.O. Box Number is Not Acceptable) 4908 Petra Court 83 Winter Spgs. FL. 32708 84 City FL 85 Zip Code															
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Frank L. Miller III President FRANK L. Miller III 4-23-99 <small>Signature, typed or printed name of registered agent and title if applicable. (NOT E: Registered Agent signature required when reinstating)</small>															
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>D</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>MILLER, FRANK L III</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>330 SHEOAH BLVD., APT 1107</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WINTER SPRINGS FL</td> <td></td> </tr> </table>				TITLE	D	<input type="checkbox"/> DELETE	NAME	MILLER, FRANK L III		STREET ADDRESS	330 SHEOAH BLVD., APT 1107		CITY-ST-ZIP	WINTER SPRINGS FL	
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STREET ADDRESS	330 SHEOAH BLVD., APT 1107														
CITY-ST-ZIP	WINTER SPRINGS FL														
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>President</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>FRANK L. Miller III</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>4908 Petra Court</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td>Winter Springs FL. 32708</td> <td></td> </tr> </table>				1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME	FRANK L. Miller III		1.3 STREET ADDRESS	4908 Petra Court		1.4 CITY-ST-ZIP	Winter Springs FL. 32708	
1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition													
1.2 NAME	FRANK L. Miller III														
1.3 STREET ADDRESS	4908 Petra Court														
1.4 CITY-ST-ZIP	Winter Springs FL. 32708														



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/12/1996	
4. FEI Number 59-3358325	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: **Frank L. Miller III** **FRANK L. Miller III** **4/23/99** **407-696-074**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #