## 2007 FOR PROFIT CORPORATION

## **FILED** ANNUAL REPORT Feb 08, 2007 08:00 Al Secretary of State DOCUMENT # P96000021429 1. Entity Name WEEZOR, INC. Principal Place of Business Mailing Address 1877 \$ FEDERAL HWY 1877 S FEDERAL HWY SUITE 210 SUITE 210 BOCA RATON, FL 33432 BOCA RATON, FL 33432 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0653008 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. DO NOT WRITE ONE S.E. THIRD AVENUE 27TH FLOOR IN THIS SPACE MIAMI, FL 33131 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) , 9. Election Campaign Financing **\$5.00** May Be FILE NOW!! FEE IS \$150.00 Trust Fund Contribution: After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ROCHON, RICHARD C 1877 S FEDERAL HWY #210 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 VΤ BRANDEN, CRIS V NAME STREET ADDRESS 1877 S FEDERAL HWY #210 CITY-ST-ZIP BOCA RATON, FL 33432 VS TITLE NAME LAWLESS, PAUL M STREET ADDRESS 1877 S FEDERAL HWY #210 DO NOT WRITE BOCA RATON, FL 33432 CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: