## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

## Jul 07, 2004 08:00 AM **DOCUMENT # P96000042250 Secretary of State** 1. Entity Name WAYMAR SERVICES, INC. Mailing Address Principal Place of Business 2202 W 33RD ST 2202 W 33RD ST PANAMA CITY, FL 32405 US PANAMA CITY, FL 32405 HS 06262004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 59-3388857 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FORREST, WAYNE 2202 W 33RD ST PANAMA CITY, FL 32405 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, typed or printed name of registered agent and title if applicable. DATE (NOTE Registered Agent signature cogulted when reinstation) U00000163665 07/07/04-80011-017 550.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. mle FORREST, WAYNE NAME STREET ADDRESS 2202 W 33RD ST PANAMA CITY, FL 32405 CITY-ST-ZIP TITLE FORREST, MARIE NAME STREET ADDRESS 2202 W 33RD ST PANAMA CITY, FL 32405 CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY -ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 507, 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: Man forest MANE FOREST 7-2-04 850-747-5041

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Description of