

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000082353

Entity Name: WEN-FOUR FLORIDA, INC.

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

2135 WOLBERT TRAIL
MARIETTA, GA 30062

New Principal Place of Business:

Current Mailing Address:

2135 WOLBERT TRAIL
MARIETTA, GA 30062

New Mailing Address:

FEI Number: 59-3471779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMAMI, MIKE
901 CAVANAUGH DRIVE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILLETTE, JOE
Address: 2135 WOLBERT TRAIL
City-St-Zip: MARIETTA, GA 30062

Title: VP () Delete
Name: RAHIMI, SYRUS
Address: 3904 HAZELHURST DRIVE
City-St-Zip: MARIETTA, GA 30066

Title: S () Delete
Name: RAHIMI, SANDI
Address: 3904 HAZELHURST DRIVE
City-St-Zip: MARIETTA, GA 30066

Title: T () Delete
Name: GILLETTE, PAM
Address: 2135 WOLBERT TRAIL
City-St-Zip: MARIETTA, GA 30062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDI RAHIMI

S

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date