2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000017554

1. Entity Name
W.G.T. ENTERPRISES, INC.

P98000017554

Principal Place of Business	Mailing Address
790 SW 40TH AVENUE PLANTATION, FL 33317-4048 US	9723 NORTH NEW RIVER CANAL ROAD 790 SW 40TH AVENUE PLANTATION, FL 33317-4048 US

DO NOT WRITE IN THIS SPACE

04252005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0817848
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURNER, WILLIAM G
9723 NORTH NEW RIVER CANAL ROAD
VILLA #419A
PLANTATION, FL 33324

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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 _____ DATE
Signature (type or print name of registered agent and title if applicable) (NOTE: Required Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fee's

10. OFFICERS AND DIRECTORS

TITLE	DPVS
NAME	TURNER, WILLIAM G
STREET ADDRESS	9723 NORTH NEW RIVER CANAL RD VILLA 419A
CITY-ST-ZIP	PLANTATION, FL 33324
TITLE	T
NAME	TURNER, WILLIAM G
STREET ADDRESS	9723 NORTH NEW RIVER CANAL RD VILLA 419A
CITY-ST-ZIP	PLANTATION, FL 33324
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04/28/05-80119-025 150.00

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12. 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 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: William G Turner 4/25/05 954-583-2018
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #