## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 05, 2006 08:00 AM Secretary of State

DOCUI 1. Entity Name WPBCP, I		3				·	
Principal Place of Business  7806 CHARNEY LANE BOCA RATON, FL 33496 US  Mailing Address 7806 CHARNEY LANE BOCA RATON, FL 33496 US				1 INGUMENT IN	r (218) (was 6811) www. Www.	11 BW118 19711 BB148 (B7	
DO NOT WRITE IN THIS SPACE				03062006 No Chg-P CR2E034 (11/05)  4. FEI Number			
	6. Name and Address of Current Regis  AUEL RNEY LANE FON, FL 33496	DO NOT WRITE IN THIS SPACE					
8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Jam familiar with, and accept the obligations of registered agent.  SIGNATURE  Signified typed or printed name of registered agent and sile if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees			
10. IITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD SUSI, SAMUEL 7806 CHARNEY LANE BOCA RATON, FL 33496	TORS			_ ñōơō	05652530	12 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/19/06	-6UUS ( -U	12 150.00 13 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SI	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP						· •	
12. I hereby indicated of the corchanged	certify that the information supplied with this if on this report or supplemental report is true proration or the receiver or trustee ampowere, or on an attachment with an anticess, with a	illing does not qualify for the ex and accurate and that my signa d to execute this report as requ il other like empowered.	emptions containe ture shall have the ired by Chapter 60	ed in Chapter 11 s same legal effe 7, Florida Statut	<ol> <li>Florida Statutes.</li> <li>as if made under es; and that my nan</li> </ol>	I further certify t oath; that I am a ne appears in Blo	hat the information an officer or director ock 10 or Block 11 if

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR