2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P98000100482

WELP ST. AUGUSTINE CORPORATION



FILED Feb 02, 2004 08:00 AM Secretary of State

Principal Place of Business

C/O ESTEIN & ASSOCIATES USA LTD 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819

Mailing Address

C/O ESTEIN & ASSOCIATES USA LTD 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819



DO NOT WRITE IN THIS SPACE

CR2E034 (10/03) 01202004 No Chg-P

Applied For 4. FEI Number 59-3456364 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ESTEIN, LOTHAR **5211 INTERNATIONAL DRIVE** ORLANDO, FL 32819

DO NOT WRITE 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				required when resistating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Can Trust Fund			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	•		· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESTEIN, LOTHAR 5211 INTERNATIONAL DR ORLANDO, FL 32819				000000029877 02/04/04-80085-015 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS GITY-SI-ZIP						
12. 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 local office as if made under onth that I am an effect or director.						

of the corporation or suppremental 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.

Lothar Estein SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(407) 354-3307