


2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED  
Feb 11, 2004 08:00 AM  
Secretary of State

DOCUMENT # P99000011656  
1. Entity Name  
V & L WAN INCORPORATED



Principal Place of Business  
4865 RIDGEMOOR CIRCLE  
PALM HARBOR, FL 34685

Mailing Address  
4865 RIDGEMOOR CIRCLE  
PALM HARBOR, FL 34685



**DO NOT WRITE IN THIS SPACE**

02012004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3556830 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
WAN, VINCENT  
4865 RIDGEMOOR CIRCLE  
PALM HARBOR, FL 34685

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

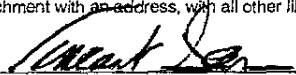
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02/11/04 30079 011 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WAN, VINCENT
STREET ADDRESS	4865 RIDGEMOOR CIRCLE
CITY-ST-ZIP	PALM HARBOR, FL 34685
TITLE	D
NAME	WAN, LESLIE
STREET ADDRESS	4865 RIDGEMOOR CIRCLE
CITY-ST-ZIP	PALM HARBOR, FL 34685
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  2/11/04 (727) 784-4699  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #