2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 20, 2006 08:00 AM DOCUMENT # P99000011656 Secretary of State 1. Entity Name V & L WAN INCORPORATED Principal Place of Business Mailing Address 4865 RIDGEMOOR CIRCLE 4865 RIDGEMOOR CIRCLE PALM HARBOR, FL 34685 PALM HARBOR, FL 34685 01122006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3556830 Nat Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WAN, VINCENT DO NOT WRITE 4865 RIDGEMOOR CIRCLE PALM HARBOR, FL 34685 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, lyped or printed name of registered agent and title if applicable fNOTE: Registered Agent signature required when rehalating! 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE WAN, VINCENT HAME STREET ADDRESS 4865 RIDGEMOOR CIRCLE CITY-ST-ZIP PALM HARBOR, FL 34685 U00000440549 03/02/06-80045-014 150.00 WAN, LESUE NAME 4865 RIDGEMOOR CIRCLE STREET AUCRESS PALM HARBOR, FL 34685

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 1 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 path; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

COTY-ST-ZIP TITLE NAME

STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

2/16/06

DO NOT WRITE 014 150.00

IN THIS SPACE

FILED