


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90195 017 \*\*\*150.00

<b>DOCUMENT #</b> P99000068219	
<b>1. Entity Name</b> WAYMART INVESTMENTS, INC.	

<b>Principal Place of Business</b> 4911 TANGEN ST. PENSACOLA FL 32526	<b>Mailing Address</b> 4911 TANGEN ST. PENSACOLA FL 32526
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<b>2. Principal Place of Business</b> 8931 Scenic Hills DR Suite, Apt. #, etc.	<b>3. Mailing Address</b> 8931 Scenic Hills DR Suite, Apt. #, etc.
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<b>City &amp; State</b> Pensacola FL	<b>City &amp; State</b> Pensacola FL
<b>Zip</b> 32514	<b>Zip</b> 32514
<b>Country</b> USA	<b>Country</b> USA

<b>4. FEI Number</b> 59-3592131	<b>Applied For</b> <input type="checkbox"/> Not Applicable
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<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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<b>6. Name and Address of Current Registered Agent</b> BRISKE, WAYNE 4911 TANGEN ST. PENSACOLA FL 32526
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<b>7. Name and Address of New Registered Agent</b> Name: Wayne Briske Street Address (P.O. Box Number is Not Acceptable): 8931 Scenic Hills DR City: Pensacola FL Zip Code: 32514
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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.**

<b>SIGNATURE</b> 	<b>DATE</b>
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2003 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> P	<b>NAME</b> BRISKE, WAYNE <input type="checkbox"/> Delete	<b>TITLE</b> President	<b>NAME</b> Wayne Briske <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b> 4911 TANGEN ST.	<b>CITY-ST-ZIP</b> PENSACOLA FL 32526	<b>STREET ADDRESS</b> 8931 Scenic Hills DR	<b>CITY-ST-ZIP</b> Pensacola FL 32514
<b>TITLE</b> VP	<b>NAME</b> RICH, MARY <input type="checkbox"/> Delete	<b>TITLE</b> VP	<b>NAME</b> Marty Rich <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b> 1212 JASPER ST	<b>CITY-ST-ZIP</b> CANTONMENT FL 32503	<b>STREET ADDRESS</b> 2000 Horton Drive	<b>CITY-ST-ZIP</b> Pensacola FL 32507
<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<b>NAME</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	

**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 empowerment.**

<b>SIGNATURE:</b> 	<b>DATE</b>	<b>Daytime Phone #</b>
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CR2E034 (10/02)