## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

s, with all other like empowered.

## Apr 28, 2004 08:00 AM Secretary of State DOCUMENT # S12597 1. Entity Name WTLN, INC. Principal Place of Business Mailing Address 524 DATURA ST **524 DATURA ST** STE.#1701 STE.#1701 W PALM BEACH, FL 33401 W PALM BEACH, FL 33401 04142004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0227081 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent VOCINO, STEVEN DO NOT WRITE 524 DATURA ST STE.#1701 IN THIS SPACE W PALM BEACH, FL 33401 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) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE VOCINO, STEVEN NAME 524 DATURA ST STREET ADDRESS W PALM BEACH, FL 33401 CITY - ST - ZIP U00000134108 04/28/04-80007-010 150.00 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADORESS 12. I 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 legal effect as if made under oath, that I am an officer or director of the corporation or the receiver of trusteelempowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

PRINTED NAME OF SIGNING OFFICER PROPERTY PROPERT

**FILED**