2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S74747

Name:

Address:

City-St-Zip:

FILED Apr 15, 2008 Secretary of State

Entity Nar	ne: WEG ELE	CTRIC MOTORS CORP.			
Current P	rincipal Place	of Business:	New Princ	ipal Place	of Business:
	THBROOK PA E, GA 30024	RKWAY, STE. 490 US			
Current M	ailing Addres	s:	New Maili	ng Address	:
	THBROOK PA E, GA 30024	RKWAY, STE. 490 US			
FEI Number:	: 65-0280210	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:		
1200 SOU	PORATION SYS TH PINE ISLAN ON, FL 33324				
	named entity s e of Florida.	ubmits this statement for the pu	urpose of changing i	ts registered	d office or registered agent, or both,
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ager	nt		Date
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PIPES, DAVID	Delete OOK PARKWAY, STE 490 30024 US	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	SILVA, JORO P	OOK PARKWAY, STE. 490	Title: Name: Address: City-St-Zip:		(X) Change()Addition D PAULO HBROOK PARKWAY, STE. 490 GA 30024 US
Title: Name: Address: City-St-Zip:	RIBEIRO, LUIZ	OOK PARKWAY, STE. 490	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:		() Change (X) Addition , RANDALL HBROOK PARKWAY, STE 490 GA 30024 US
Title:	()	Delete	Title:	VP	() Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

BARRY, PETER

SUWANEE, GA 30024

1327 NORTHBROOK PARKWAY, STE 490

SIGNATURE:	DAVID A PIPES	PCOD	04/15/2008