


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
May 07, 2004 08:00 AM
Secretary of State

DOCUMENT # F92060
 1. Entity Name
 WORLD INDUSTRIAL RESOURCES CORP.



Principal Place of Business 13100 56TH COURT N SUITE 710 CLEARWATER, FL 33760	Mailing Address 13100 56TH COURT N SUITE 710 CLEARWATER, FL 33760
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DO NOT WRITE IN THIS SPACE



04222004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-2945329	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UNGER, LESLIE A
 13100 56TH COURT N
 SUITE 710
 CLEARWATER, FL 33760

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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.

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

U00000158173
 05/07/04 00010 024 300.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P UNGER, LESLIE A 13100 56TH COURT N #710 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EGLI, JURG 13100 56TH COURT N #710 CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DORMAN, NEAL T 460 PARK AVE NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 empowered.

SIGNATURE:  5/4/04 727572999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #