

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 31, 2006 8:00 am**  
**Secretary of State**

07-31-2006 90004 020 \*\*\*150.00

**50023481**



07112006 Chg-P CR2E034 (11/05)

<b>DOCUMENT # K48476</b> 1. Entity Name OFF THE WALL - FLETCHER, INC.					
Principal Place of Business 2315 E. FLETCHER AVE. TAMPA, FL 33612-9405			Mailing Address 2315 E. FLETCHER AVE. TAMPA, FL 33612-9405		
2. Principal Place of Business  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State  Zip      Country			City & State  Zip      Country		
4. FEI Number <b>59-2917131</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>JAMES, SHARON</b> <b>22010 DARLEY PL</b> <b>LAND O LAKES, FL 34639</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JAMES, SHARON 22010 DARLEY PL. LAND O' LAKES, FL 34639		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Sharon James</i> <b>SHARON JAMES</b>			<b>7/26/06 813-977-0792</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

ATTACHMENT

July 26, 2006

50023481

# R48476

To whom it may concern,

Enclosed find check for \$150<sup>00</sup> and  
signed 2006 annual report. I am asking  
for a waiver of the \$400<sup>00</sup> penalty.

--- We sent the postcard we received in  
January right back in requesting the annual  
Report as I don't do computers. We never  
received anything until we got the late notice

Thank-you for your consideration

Sharon James Pres.

By The Wals Fletch

813-977-0792