

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000117431	
1. Entity Name WONDERLAND WEB CONSULTING CORPORATION	

Principal Place of Business 18948 SW 33RD ST MIRAMAR, FL 33029 US	Mailing Address 18948 SW 33RD ST MIRAMAR, FL 33029 US
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DO NOT WRITE IN THIS SPACE

04222008 No Chg-P CR2E034 (11/05)

4. FEI Number 06-1660409	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

DE ARMAS, ORLANDO
12002 SW 128TH COURT
SUITE 208
MIAMI, FL 33186

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IN THIS SPACE**

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 *Thamaira Ettorre* DATE 4/28/08

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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LAREZ, FRANCISCO 4530 HIATUS RD SUITE 114 SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ETTORRE, THAMAIRA 18948 SE 33 CT HOLLYWOOD, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SERRANO, FRANCISCO 4530 HIATUS RD SUITE 114 SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROHERO, VALENTIN 4530 HIATUS RD. SUITE 114 SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/29/08-80104-015 150.00

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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.

SIGNATURE: *Thamaira Ettorre* Date 4/28/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR