


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000025924
 1. Entity Name
THE WONDERFUL WORLD GALLERY CORP.



Principal Place of Business 215 LONGVIEW AVE # 204 CELEBRATION, FL 34747 US	Mailing Address P.O. BOX 470042 CELEBRATION, FL 34747 US
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DO NOT WRITE IN THIS SPACE



09072005 No Chg-P CR2E034 (10/03)

4. FEI Number 92-0192095	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
 GERALDES, MARCO A
 215 LONGVIEW AVE
 # 204
 CELEBRATION, FL 34747

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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
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GERALDES, MARCO A 215 LONGVIEW AVE #204 CELEBRATION, FL 34747
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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: *Marco A. Gerdal* 09-07-05 381.939.0960
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #