

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 31, 2004 8:00 am**  
**Secretary of State**

08-31-2004 90002 035 \*\*\*150.00

**DOCUMENT # P03000064978**

1. Entity Name  
**WAREHOUSE SENSATIONS INC.**




Principal Place of Business      Mailing Address  
**7353 LAWN TENNIS LANE**      **7353 LAWN TENNIS LANE**  
**JACKSONVILLE, FL 32277**      **JACKSONVILLE, FL 32277**

2. Principal Place of Business      3. Mailing Address  
**2270 BELEN DR**      **2270 BELEN DR**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**DELTONA FL**      **DELTONA FL**

Zip      Country      Zip      Country  
**32738**      **VOLUSIA**      **32738**      **VOLUSIA**

**54070966**



08032004      Chg-P      CR2E034 (10/03)


4. FEI Number      Applied For  
**20-0076993**      Not Applicable

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**LEGALZOOM NEVADA INC**  
**44 W. FLAGLER ST.**  
**SUITE 675**  
**MIAMI, FL 33130**

7. Name and Address of New Registered Agent  
 Name **CHERYL WALLER**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2270 BELEN DRIVE**  
 City **DELTONA**      **FL**      Zip Code **32738**

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  **CHERYL A. WALLER, PRESIDENT**      **8/26/04**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004**

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.

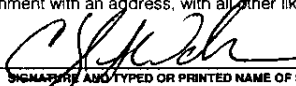
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>WALLER, CHERYL</b> <b>7353 LAWN TENNIS LANE</b> <b>JACKSONVILLE, FL 32277</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIRECTOR</b> <b>JOSEPH R. WALLER, JR</b> <b>2270 BELEN DR</b> <b>DELTONA FL 32738</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT</b> <b>CHERYL A. WALLER</b> <b>2270 BELEN DR</b> <b>DELTONA FL 32738</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **CHERYL A. WALLER**      **8/26/2004**      **575-0537**  
Signature      Date      Daytime Phone #