

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080240

FILED  
May 04, 2004  
Secretary of State

**Entity Name:** WAY OUT WEAR DESIGN COMPANY INCORPORATED

**Current Principal Place of Business:**

851 ESCABAR DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

4210 L.B. MCLEOD ROAD  
106  
ORLANDO, FL 32811

**Current Mailing Address:**

851 ESCABAR DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 06-1701917      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, JAMIE  
851 ESCABAR DRIVE  
ALTAMONTE SPRINGS, FL 32714      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WILLIAMS, JAMIE  
Address: 851 ESCABAR DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMIE WILLIAMS

P

05/04/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date