

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2004 8:00 am
Secretary of State

05-03-2004 90423 047 ***150.00

DOCUMENT # P03000109752																											
1. Entity Name WORLD AMERICAN MANTIS ASSOCIATION W.A.M.A., CORP.																											
Principal Place of Business 813 PINEBERRY DRIVE APT. 101 BRANDON, FL 33510-4911		Mailing Address 813 PINEBERRY DRIVE APT. 101 BRANDON, FL 33510-4911																									
2. Principal Place of Business 703 Providence Trace Circle Apt. 304 Brandon, FL		2. Mailing Address 703 Providence Trace Circle Apt. 304 Brandon, FL																									
3. City & State Brandon, FL		3. City & State Brandon, FL																									
4. Zip 33511		4. Zip 33511																									
5. Country U.S.A.		5. Country U.S.A.																									
6. Name and Address of Current Registered Agent PENALOZA-BALDA, JOSE 813 PINEBERRY DRIVE APT. 101 BRANDON, FL 33510-4911		7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ FL 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all power like and empowered.																											
SIGNATURE: _____		4-29-2004 (813) 661-7412																									
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR		Date Daytime Phone #																									

*"New Address".