

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90004 006 ***150.00

DOCUMENT # P04000003343

1. Entity Name
A WORLD OF TROPICAL FISH INC.



Principal Place of Business
**770 734 S FEDERAL HWY
DEERFIELD BCH, FL 33441**

Mailing Address
**770 734 S FEDERAL HWY
DEERFIELD BCH, FL 33441**

2. Principal Place of Business - No P.O. Box #
770 S. Federal Hwy
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Deerfield BCH, FL 33441
Zip Country

City & State
Zip Country

03242007 Chg-P CR2E034 (12/06)

4. FEI Number
26-0075776

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GIANNETTA, SCOTT
925 NE 24 AVE
POMPAHO BEACH, FL 33062**

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 Scott Giannetta **SCOTT Giannetta** 3-24-07
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	GIANNETTA, SCOTT	925 NE 24 AVE	POMPAHO BCH, FL 33062	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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: Scott Giannetta **SCOTT Giannetta** 3-24-07 954-418-6448
Signature and typed or printed name of signing officer or director Date Daytime Phone #