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2007 FOR PROFIT CORPORATION ANNUAL REPORT

08-21-2007 90006 042 ***150.00
P06000060412

FILED

07 OCT 11 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000060412					
1. Entity Name WORLD SHADE AWNING CORP.					
Principal Place of Business 280-B S ATLANTIC AVE COCOA BEACH, FL 32931			Mailing Address 280-B S ATLANTIC AVE COCOA BEACH, FL 32931		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-4830 910	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GALLO, FRANK 280-B S ATLANTIC AVE COCOA BEACH, FL 32931			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLO, FRANK 280-B S ATLANTIC AVE COCOA BEACH, FL 32931	<input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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 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 another fee empowered.					
SIGNATURE: <u>Frank Gallo, Pres.</u> 8/10/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Daytime Phone #					

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World Shade Awning Corporation
280-B S Atlantic Ave
Cocoa Beach, FL 32931

October 5th, 2007

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Attn: Tina Carter

Sub: UBR for World Shade Awning Corp.
Doc. No. P06000060412

Dear Ms. Carter:

Please be advised that I did not file my UBR because I did not receive a reminder. I am very sorry for this oversight and would appreciate instructions on how I may be reinstated.

Thank your for your attention to this matter.

Very truly yours,


Frank Gallo

As per telephone conversation rejection letter
not received by corp. requested late/reinstatement
fees be waived. 