

2008 FOR PROFIT CORPORATION ANNUAL REPORT

8/27/2008-90010-009-\$550.00-\$550.00

FILED

2008 SEP 16 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FEE 26-0274842

07072008 Chg-P CR2E034 (12/08)

DOCUMENT # P07000064459

1. Entity Name
WAYNE'S WORLD INVESTMENTS, INC



Principal Place of Business
**5330 1ST ST
BRADENTON, FL 34203 US**

Mailing Address
**5330 1ST ST
BRADENTON, FL 34203 US**

2. Principal Place of Business - No P.O. Box #
5330 1st St

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

City & State
Bradenton FL

City & State
Bradenton FL

Zip
34263

Country
Mexico

Zip
34263

Country
Mexico

4. FEI Number **26-0274842**

Applied For
☒ Not Applicable

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

6. Name and Address of Current Registered Agent

**USA-RA LLC
873 WEST BAY DRIVE
SUITE 105
LARGO, FL 33770**

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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRIS, WAYNE P 5330 1ST ST BRADENTON, FL 34203 <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	S,T HARRIS, WAYNE P 5330 1ST ST BRADENTON, FL 34203 <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	VP HARRIS, MARGARET L 5330 1ST ST BRADENTON, FL 34203 <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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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: Wayne P Harris WAYNE PHARRIS 8/25/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #