2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P96000049070

Principal Place of Business

Maling Address

ONE BEACH DRIVE, S.E.

ONE BEACH DRIVE, S.E.

301-C

301-C

ST PETERSBURG, FL 33701

WORLD TRADENET, INC.

ST PETERSBURG, FL 33701

FILED Apr 03, 2006 08:00 AM Secretary of State



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03172006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3383713

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARKER, J. KENNETH ONE BEACH DRIVE, S.E. 301-C ST PETERSBURG, FL 33701

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	tions of registered agent.	arbose or crimitalist us registered our	JG ())	egister e u agent, or oc	nis, in the State of Florida. Tatti (aminal with all december	
SIGNATURE.	Signature, typed or printed name of registered agent and tille if	applicable. (NOTE: Registered Agent (signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECT	TORS				
TITLE NAME STREET ADDRESS CYTY-ST-ZIP	P PARKER, J K ONE BEACH DRIVE, S.E. #301-C ST PETERSBURG, FL 33701			000000489322 04/18/06-80013-007 150 0	U00000489322 04/18/06-80013-007 158.80	
TITLE NAME STREET ADDRESS CSTY-ST-ZIP						

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NAME STREET ADDRESS CITY-ST-ZIP TIRE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP

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 seport 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 purpowered.

SIGNATURE:

me NAME STREET ADDRESS

CITY-ST-ZIP TITLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT