2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000055990

1. Entity Name
WALLPAPER OUTLET, INC.

Principal Place of Business	Mailing Address
1014 8TH AVE WEST PALMETTO, FL 34221	1014 8TH AVE WEST PALMETTO, FL 34221

DO NOT WRITE IN THIS SPACE

04302008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0896998	Not Applicable

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

6. Name and Address of Current Registered Agent

ROTH, LINDA J
6710 ELLENTON GILLETTE
#9
PALMETTO, FL 34221

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS	
TITLE	P	
NAME	ROTH, LINDA J	
STREET ADDRESS	1014 8TH AVE WEST	
CITY-ST-ZIP	PALMETTO, FL 34221	
TITLE	S	
NAME	ABREGO, LILLIAN	
STREET ADDRESS	200 E. AITKEN	
CITY-ST-ZIP	PECK, MI 48466	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		
NAME		
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CITY-ST-ZIP		

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05/29/08-80109-002 150.00

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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: _Linda Roth_ LINDA ROTH   4-30-08   941-729-4275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #