

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED


2006 JUL -5 AM 10: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P98000094952

1. Entity Name
WIRE PUBLISHING, INC.



Principal Place of Business
1111 KANE CONCOURSE
501
BAY HARBOUR ISLANDS FL 33154

Mailing Address
PO BOX 398537
MIAMI BEACH FL 33239

2. Principal Place of Business
Suite, Apt. #, etc.

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

City & State
City & State

3rd Party
Sophie Delaplaine
90 Park Drive Apt. #4
Bal Harbour, FL 33154

4. FEI Number
65-0874871

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELAPHINE, LOUISE S
10 LAGORCE CIRCLE
MIAMI BEACH FL 33141

Name
Street Address (Not Acceptable)
City

Sophie Delaplaine
90 Park Drive Apt. #4
Bal Harbour, FL 33154

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: *[Signature]* (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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	DPST DELAPLAINE, LOUISE S PO BOX 398537 MIAMI BEACH FL 33239 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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900077401539
07/12/06--01058--022 **150.00

[Signature] 7/10/06

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: _____ Daytime Phone #: _____

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*Wire Publishing
1111 Kane Concourse Suite #501
Bay Harbour Islands, FL 33154*

June 20, 2006

Re: Wire Publishing FEI # 65-0874871

Dear Madame/ Sir:

I called your office and spoke to Marguarita on 5/23/06 to have the Annual Report form resent. For some reason, the change of address form that I sent in was never processed. I am sending the form with a check for \$150.00 as per Marguarita's instructions. Thank you for your assistance in this matter. Please call me at 305-798-5642 should you need any other information.



Sophie Delaplaine
Wire Publishing, Inc