

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V27315

FILED
Apr 23, 2003
Secretary of State

Entity Name: WORLD OF AWNINGS, INC.

Current Principal Place of Business:

151 W 21 ST
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

151 W 21 ST
HIALEAH, FL 33010 US

New Mailing Address:

FEI Number: 65-0330105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTOLONGO, EDUARDO
151 W 21 ST
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOTOLONGO, IGNACIO
Address: 151 W 21 ST
City-St-Zip: HIALEAH, FL

Title: VP () Delete
Name: SOTOLONGO, EDUARDO,
Address: 151 W 21 ST
City-St-Zip: HIALEAH, FL

Title: T () Delete
Name: GONZALO, JORGE
Address: 5990 SW 22 ST
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: CARIDAO, PAZ
Address: 8370 SW 2ND STREET
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOTOLONGO, IGNACIO
Address: 151 W 21 ST
City-St-Zip: HIALEAH, FL 33010

Title: VP (X) Change () Addition
Name: SOTOLONGO, EDUARDO,
Address: 151 W 21 ST
City-St-Zip: HIALEAH, FL 33010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IGNACIO SOTOLONGO

PD

04/23/2003

Electronic Signature of Signing Officer or Director

Date