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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # B0100000205		
1. Entry Name MARLIN MEDICAL GROUP LIMITED PARTNERSHIP		

Principal Place of Business 50 WEST LIBERTY STREET, STE. 650 RENO, NV 89501	Mailing Address % MARLIN MEDICAL GROUP 6990 LAKE ELLENOR DRIVE ORLANDO, FL 32809
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2. Principal Place of Business 3600 Commerce Blvd. Suite, Apt. #, etc.	3. Mailing Address 3000 Commerce Blvd. Suite, Apt. #, etc.
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City & State Kissimmee, FL	City & State Kissimmee, FL
Zip 34741	Zip 34741
Country USA	Country USA



4. FEI Number 88-0443702	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STAPLES, JOHNSTON R III 3600 COMMERCE BLVD KISSIMMEE, FL 34741		7. Name and Address of New Registered Agent Name: Richard Baker Street Address (P.O. Box Number is Not Acceptable): 2535 Success Drive City: Odessa FL Zip Code: 33556	
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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: R. W. Baker DATE: 3/25/03

9. Capital Contributions as Shown on record: \$500.00

10. Amount of Capital Contributions in FLORIDA to date: 2197552.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # FO1000003127	NAME WORLD WIDE HOLDINGS, INC.	STREET ADDRESS	
STREET ADDRESS 60 W. LIBERTY STREET, STE. 650	CITY-ST-ZIP RENO, NV 89501	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
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STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: R W Baker, Sec / Treas. DATE: 3/25/03

STAPLE CHECK HERE

CR2E003 (10/02)