## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachm

SIGNATURE:

## Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # F03000001018 1. Entity Name WORLDVIEW FINANCIAL LTD, INC. Principal Place of Business\_ Mailing Address 284S FARIBAIRN DR. 284S FARIBAIRN DR. DELTONA, FL 32725 DELTONA, FL 32725 04122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0046502 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent VINCI, GUY DO NOT WRITE 28 4S FAIRBAIRN DR. DELTONA, FL 32725 IN THIS SPACE 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 tide if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. $\Box$ Added to Fees OFFICERS AND DIRECTORS 10. TITLE 000000305786 04/14/05-80098-020 158.75 BALDRIDGE, ORIVLLE D NAME STREET ADDRESS 284 S FAIRBAIRN DR. CITY-ST-ZIP DELTONA, FL 32725 TITLE ONTIVEROS, ROBIN NAME STREET ADDRESS 284 S FAIRBAIRN DR. CITY-ST-ZIP DELTONA, FL 32725 TITLE NAME VINCI, GUY STREET ADDRESS 284 S FAIRBAIRN DR. DO NOT WRITE CITY-ST-ZIP DELTONA, FL 32725 MLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CAY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recorder or trustee empsyment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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