

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051884

Entity Name: WORLD WINERIES, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

12025 CITRUS FALLS CIRCLE, UNIT 306
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

12025 CITRUS FALLS CIRCLE, UNIT 306
TAMPA, FL 33625

New Mailing Address:

FEI Number: 20-2647722

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STULL, R JEFFREY
602 S BOULEVARD
TAMPA, FL 33606 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: MG () Delete
Name: MCMURDY, JOSEPH D
Address: CTRA. VALENCIA KM. 45,700
City-St-Zip: ZARAGOZA, AR 50300 SP

Title: PRES () Delete
Name: BRIZ, JOSE ANTONIO
Address: CTRA. VALENCIA KM 45,700
City-St-Zip: ZARAGOZA, AR 50400 SP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCMURDY, JOSEPH D
Address: 12025 CITRUS FALLS CIRCLE, UNIT 306
City-St-Zip: TAMPA, FL 33625 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOSEPH D. MCMURDY

VP

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date