

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90192 018 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

44070003



04262004 Chg-P CR2E034 (10/03)

DOCUMENT # P97000084819			
1. Entity Name C.C.N. WORLD CORPORATION			
Principal Place of Business 16561 LAKE TREE DRIVE WESTON, FL 33326		Mailing Address 16561 LAKE TREE DRIVE WESTON, FL 33326	
2. Principal Place of Business		3. Mailing Address 1112 WESTON RD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 229	
City & State		City & State WESTON, FL	
Zip	Country	Zip	Country
33326		33326	USA
4. FEI Number 65-0823984		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 MOODY, JONES, MONTEFUSCO & KRAUSE, PA 1333 S UNIVERSITY DRIVE SUITE 201 PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		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 _____ DATE _____ <small>Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when withdrawing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P SANSEVIERO RAKUSA, NICOLAS 1112 WESTON RD #229 WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT SANSEVIERO RAKUSA, CARMELA 16561 LAKE TREE DRIVE WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS SANSEVIERO RAKUSA, CAROLINA 16561 LAKE TREE DRIVE WESTON, FL 33326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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 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:		Date: 04/28/04	Daytime Phone #: (754) 246 9748
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BRANDED OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>