

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 26, 2007 8:00 am**  
**Secretary of State**

02-26-2007 90080 033 \*\*\*158.75

**DOCUMENT # 126404**

1. Entity Name  
WWC, INC



Principal Place of Business  
2875 NE 191 STREET, PH1  
AVENTURA, FL 33180 US

Mailing Address  
2875 NE 191 STREET, PH1  
AVENTURA, FL 33180 US

40024990



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 630817

City & State

City & State

Miami, FL

Zip

Country

Zip

Country

33163

USA

01032007

Chg-P

CR2E034 (12/06)

4. FEI Number  
59-0189970

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLEIN, THEODORE J  
8030 PETERS ROAD, STE. D-104  
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$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  
ST  
CATHARINE M.S. SNEAD  
600 PONTE VERDE BLVD #310  
PONTE VEDRA, FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
President/Director  
JACK AZOUT  
2875 NE 191 ST. PH-1  
AVENTURA, FL 33180 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
CRAIG, JAMES  
745 BOBCAT LANE  
HAMILTON, MT ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP/S/T/Director  
Erwin Sredni  
2875 NE 191 ST. PH-1  
Aventura, FL 33180 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
CRAIG, MIA S  
569 PINE FOREST TRAIL  
ORANGE PARK, FL 32073 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
GOODWIN, CORBY T  
1403 SW NAOMI ST  
PALM CITY, FL 34990 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JACK AZOUT 2/22/07 (305) 935-5175