

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-08-2008 90020 001 ***300.00

DOCUMENT # 372193

1. Entity Name
**WORTH INTERNATIONAL COMMUNICATIONS
CORPORATION**



Principal Place of Business
**5979 N.W. 151 ST., #120
MIAMI LAKES, FL 33014 US**

Mailing Address
**5979 N.W. 151 ST., #120
MIAMI LAKES, FL 33014 US**

00000001



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1313616

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HERMAN, HAL
5979 N.W. 151 ST., #120
MIAMI LAKES, FL 33014**

**DO NOT WRITE
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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE C
NAME HERMAN, HAL
STREET ADDRESS 5979 N.W. 151 ST., #120
CITY-ST-ZIP MIAMI LAKES, FL 33014

TITLE P
NAME HERMAN, LAUREL
STREET ADDRESS 5979 N.W. 151 ST., #120
CITY-ST-ZIP MIAMI LAKES, FL 33014

TITLE VP
NAME HERMAN, GARY
STREET ADDRESS 5979 N.W. 151 ST., #120
CITY-ST-ZIP MIAMI LAKES, FL 33014

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: *Huff*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08

Date Daytime Phone #