

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 641975

FILED
Apr 06, 2009
Secretary of State

Entity Name: WORLDWIDE TRAVEL & CRUISES, INC.

Current Principal Place of Business:

8784 S.W. 8TH STREET
MIAMI, FL 331743201 US

New Principal Place of Business:

Current Mailing Address:

8784 SW 8TH ST
MIAMI, FL 331743201 US

New Mailing Address:

8784 S.W. 8TH STREET
MIAMI, FL 331743201 US

FEI Number: 59-1950612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACEITUNO, FELICIANA
8320 MILLER DR
MIAMI, FL 33155 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: PD () Delete
Name: ACEITUNO, FELICIANA
Address: 8320 MILLER DRIVE
City-St-Zip: MIAMI, FL 33155

Title: STD () Delete
Name: ACEITUNO, FELICIANA
Address: 8320 MILLER DRIVE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: ACEITUNO, FELICIANA
Address: 8320 MILLER DRIVE
City-St-Zip: MIAMI, FL 33155

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: FELICIANA ACEITUNO

PD

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date