## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000000688

Entity Name: WOLFGANG PUCK WORLDWIDE, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
SUIITE 100	SCENT DRIVE						
Current Mailing Address:			New Mailing Address:				
100 N. CRESCENT DRIVE SUIITE 100 BEVERLY HILLS, CA 90210							
FEI Number: 95-4809367 FEI Number Applied For ( ) FEI Number			nber Not Applicable ( ) Certificate of Status Desired ( )				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303 US							
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 Ag	ent			Date	
Election Campaign Financing Trust Fund Contribution ( ).							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	PUCK, WOLFGA 100 N CRESCEN BEVERLY HILLS VSTD ( ) [	T DRIVE, SUITE 100		Title: Name: Address: City-St-Zip: Title:	BEVERLY H	SCENT DRIVE, SUITE 1 IILLS, CA 90210 (X) Change ( ) Additio	00
Name: Address: City-St-Zip:	ESSA, JOSEPH 100 CRESCENT BEVERLY HILLS	DRIVE, SUITE 100 , CA 90210		Name: Address: City-St-Zip:		EFFI C ENT DRIVE, SUITE 100 IILLS, CA 90210	ס
Title: Name: Address: City-St-Zip:	RABIN, STUART	DRIVE, SUITE 100		Title: Name: Address: City-St-Zip:		( ) Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	D ()E SCULLEY, DAVIE 100 CRESCENT BEVERLY HILLS	) DRIVE, SUITE 100		Title: Name: Address: City-St-Zip:		() Change () Addition	n
Title: Name: Address: City-St-Zip:	JACOBSON, MIT	IT DRIVE, SUITE 100		Title: Name: Address: City-St-Zip:		( ) Change ( ) Additio	n
Title: Name: Address: City-St-Zip:	CHU, DAVID	Delete NT DRIVE, SUITE 100 CA 90210		Title: Name: Address: City-St-Zip:		( ) Change ( ) Additio	n

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 C. ESSA VSTD 04/13/2009