

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F93000001630

1. Entity Name  
WORLD GRAPHICS, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 OCT 29 PM 12:51

Principal Place of Business  
1239 E NEWPORT CENTER DR  
115  
DEERFIELD BEACH, FL 33442 US

Mailing Address  
1239 E NEWPORT CENTER DR  
115  
DEERFIELD BEACH, FL 33442 US

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08222007

Chg-P

CR2E034 (12/06)

4. FEI Number  
05-0447687

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KAHN, ROBERT M ESQ.  
C/O KAHN & GUTTER  
PAINE WEBBER PLAZA, 8211 W BROWARD BLVD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name  
JOHN SCHOUTEN  
Street Address (P.O. Box Number is Not Acceptable)  
6359 POWDAPPLE RD  
City  
BOCA RATON FL Zip Code  
33433

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)

8/22/07  
DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☒ Delete  
NAME DE AMORIM PACHECO, ANTONIO M  
STREET ADDRESS RUA SANTO EUFREDO, 212- JD GUEDALA  
CITY-ST-ZIP SAO PAULO, BRAZIL, 05611070

TITLE V ☒ Delete  
NAME DOMINGUEZ, HELENE D  
STREET ADDRESS RUA SANTO EUFREDO, 212 - JD GUEDALA  
CITY-ST-ZIP SAO PAULO, BRAZIL,

TITLE S ☐ Delete  
NAME MAIA, MARIA R  
STREET ADDRESS 18688 OCEAN MIST DR  
CITY-ST-ZIP BOCA RATON, FL 33498

TITLE SECRETARY ☐ Delete  
NAME FREEMAN, JAMIE D  
STREET ADDRESS 1161NE 24 AVE #4  
CITY-ST-ZIP POMPAHO BEACH, FL 33062

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 800112030098  
CITY-ST-ZIP 11/06/07--01016--005 \*\*61.25

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

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

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

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

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

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

(954) 570-7026

Dayton & Pines #