

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002923

Entity Name: WW LBV INC.

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

2000 HOTEL PLAZA BLVD  
ORLANDO, FL 32830

## New Principal Place of Business:

## Current Mailing Address:

5847 SAN FELIPE #4650  
HOUSTON, TX

## New Mailing Address:

FEI Number: 76-0565758

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD., INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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: CEO ( ) Delete  
Name: WILLIAMS, TODD  
Address: 85 BROAD ST., 19TH FLOOR  
City-St-Zip: NEW YORK, NY 10004

Title: VP ( ) Delete  
Name: BONFIELD, KIM E  
Address: 100 CRESCENT CT-STE 100  
City-St-Zip: DALLAS, TX 75201

Title: V ( ) Delete  
Name: O'BRIEN, ELIZABETH  
Address: 100 CRESCENT CT-STE 1000  
City-St-Zip: DALLAS, TX 75201

Title: VP ( ) Delete  
Name: MANGALJI, MAJID  
Address: 5847 SAN FELIPE-STE 4650  
City-St-Zip: HOUSTON, TX 77057

Title: VP ( ) Delete  
Name: MANGALJI, MOEZ  
Address: 5847 SAN FELIPE STE 4650  
City-St-Zip: HOUSTON, TX 77057

Title: VAS ( ) Delete  
Name: MANGALJI, FERED  
Address: 5847 SAN FELIP-STE 4650  
City-St-Zip: HOUSTON, TX 77057

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: MOHAMED THOWFEEK

AS

03/20/2009

Electronic Signature of Signing Officer or Director

Date