


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 12, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # K76824**

1. Entity Name  
**WORTH REPEATING, INC.**



Principal Place of Business  
**1732 N.E. 26TH ST.  
 FT. LAUDERDALE, FL 33304**

Mailing Address  
**1732 N.E. 26TH ST.  
 FT. LAUDERDALE, FL 33304**



05082006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0106871** 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

**HELMHOLDT, MARGARET  
 1248 SEMINOLE DR  
 FT. LAUDERDALE, FL 33304**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>HELMHOLDT, MARGARET</b>
STREET ADDRESS	<b>1248 SEMINOLE DR</b>
CITY - ST - ZIP	<b>FT. LAUDERDALE, FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

UD0000564987  
 05/20/06-80099-013 150.00

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: Margaret Helmholtz Date: 5-8-06 Daytime Phone #: 954-568-4443