2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# L02000012001

Entity Name: WORLDWIDE ECONOMIC DEVELOPMENT TECHNOLOGIES, LLC

Current Principal Place of Business:

9727 N.E. 2ND AVE.
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

6265 BISHOP PLACE
RIVERDALE, GA 30296

New Mailing Address:

155 WINNSTEAD DRIVE
LEESBURG, GA 31763

FEI Number: 02-0601542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAMBERS, TERRELL F JR
9727 N.E. 2ND AVE.
MIAMI SHORES, FL 33138

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

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	LEE, LEBARON J	
Address:	6265 BISHOP PLACE	
City-St-Zip:	RIVERDALE, GA 30296	
Title:	MGR	( ) Delete
Name:	GILMORE, JAMES M	
Address:	155 WINNSTEAD DR.	
City-St-Zip:	LEESBURG, GA 31763	
Title:	MGR	( ) Delete
Name:	MILLER, AUNDRE L	
Address:	1250 N. MASON ST.	
City-St-Zip:	CHICAGO, IL 60651	

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES M GILMORE MGR 04/27/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date