2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# M47444

Entity Name: WINCORP INTERNATIONAL, INC.

Current Principal Place of Business:

10025 NW 116 WAY
SUITE 14
MEDLEY, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

10025 NW 116 WAY
SUITE 14
MEDLEY, FL 33178 US

New Mailing Address:

FEI Number: 59-2788629 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVY, PAUL A MR.
16160 NW 9 DRIVE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

RAHN, THOMAS MR.
3878 CRESTWOOD CIRCLE
WESTON, FL 33331 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: THOMAS RAHN 03/21/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LEVY, ROBERT E MR.
Address: CONTENT, MCCOOK'S PEN
City-St-Zip: ST. CATHERINE, JAMAICA, W.I., JA CONTENT JA

Title: DP ( ) Delete
Name: RAHN, THOMAS MR.
Address: 10025 NW 116 WAY #14
City-St-Zip: MEDLEY, FL 33178 US

Title: DS ( ) Delete
Name: LEVY, PAUL A MR.
Address: 10025 NW 116 WY # 14
City-St-Zip: MEDLEY, FL 33178 US

Title: D (X) Delete
Name: LEVY, CHRISTOPHER MR.
Address: CONTENT, MCCOOK'S PEN
City-St-Zip: ST. CATHERINE, JAMAICA, W.I., JA CONTENT JA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DPS (X) Change ( ) Addition
Name: RAHN, THOMAS MR.
Address: 10025 NW 116 WAY #14
City-St-Zip: MEDLEY, FL 33178 US

Title: D (X) Change ( ) Addition
Name: LEVY, CHRISTOPHER MR
Address: CONTENT, MCCOOK'S PRN
City-St-Zip: ST.CATHERINE, JAMAICA, W.I., JA CONTENT JA

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 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: THOMAS RAHN DPS 03/21/2007
Electronic Signature of Signing Officer or Director Date