

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N000000000561

1. Entity Name

WIN, A World of Interactive Neighbors, Corp.

Principal Place of Business

2180 NW 18th Ave., Suite A-6
Pompano Beach, Florida 33069

Mailing Address

2. Principal Place of Business

2180 NW 18th Ave.
Suite A-6

3. Mailing Address

2180 NW 18th Ave.
Suite A-6

Suite, Apt. #, etc.

Suite A-6

City & State

Pompano Beach, Florida

Zip

33069

Country

USA

Zip

33069

Country

USA

6. Name and Address of Current Registered Agent

Dominick Richard Rizzo
2180 NW 18th Ave.
Suite A-6
Pompano Beach, Florida 33069

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE.

00057705

7. Name and Address of New Registered Agent

Name Dominick Richard Rizzo
Street Address (P.O. Box Number is Not Acceptable)
2180 NW 18th Ave.
Suite A-6
City Pompano Beach

FL Zip Code 33069

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.

SIGNATURE



Signature, typed or printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when reinstating)

DATE

5/28/01

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

P/T
Dominick Richard Rizzo
2180 NW 18th Ave., Suite A-6
Pompano Beach, FL 33069

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

D/M
Ronald Marclaw
2180 NW 18th Ave. Apt. A-6
Pompano Beach, Florida 33069

Change

Addition

S/D
Frank Rizzo
2180 NW 18th Ave. Suite A-6
Pompano Beach, Florida 33069

Change

Addition

S/D
Carol King
6751 NW 21st Street
Margate, Florida 33063

Change

Addition

D
Edwards Lee Church
428 Orchard View Lane
Lakewood, Georgia 30552

Change

Addition

D
Jon Owen
3319 Jon Jon Drive
Orlando, Florida 32822

Change

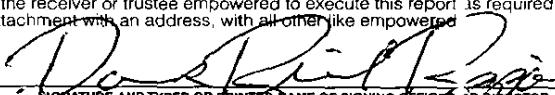
Addition

D
Elizabeth Schippert
111 West End Ave,
Island Heights, NJ. 08732

Change

Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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

5/28/01 954-202-8282
Date Daytime Phone
24. 4

FILED

Jun 05, 2001 8:00 am
Secretary of State

06-05-2001 90031 045 ****70.00

CR2E037 (11/00)