

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001959

FILED
Jul 24, 2006
Secretary of State

Entity Name: WORLD HEALTH & ECOLOGY FOUNDATION, INC.

Current Principal Place of Business:

2758 W. ATLANTIC BLVD.
NO. 9
POMPANO BEACH, FL 33069

New Principal Place of Business:

3505 OAKS WAY
NO. 512
POMPANO BEACH, FL 33069

Current Mailing Address:

2758 W. ATLANTIC BLVD.
NO. 9
POMPANO BEACH, FL 33069

New Mailing Address:

PO BOX
668476
POMPANO BEACH, FL 33066

FEI Number: 65-1102572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BONDY, JORGE
2758 W. ATLANTIC BLVD.
NO. 9
POMPANO BEACH, FL 33069 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DTC () Delete
Name: LUIS, BONDY
Address: 2758 W ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33069

Title: VD (X) Delete
Name: PIAGGIO, EDUARDO
Address: 2758 W. ATLANTIC BLVD # 9
City-St-Zip: POMPANO BEACH, FL 33069

Title: VD (X) Delete
Name: URIBE, FARAON
Address: 2758 W. ATLANTIC BLVD. # 9
City-St-Zip: POMPANO BEACH, FL 33069

Title: DS (X) Delete
Name: GUILDING, MARK
Address: 2758 W. ATLANTIC BLVD. # 9
City-St-Zip: POMPANO BEACH, FL 33069

Title: P (X) Delete
Name: MITTASCH, RICHARD
Address: 20A GROVE STREET
City-St-Zip: NICKSVILLE, NY 11801

Title: D (X) Delete
Name: FERNANDEZ, DANIEL
Address: 13900 COUNTY RD. 445, SUITE 107-408
City-St-Zip: CLERMONT, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDTC (X) Change () Addition
Name: LUIS, BONDY
Address: 3505 OAKS WAY SUITE 512
City-St-Zip: POMPANO BEACH, FL 33069

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

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

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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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS BONDY

PDTC

07/24/2006

Electronic Signature of Signing Officer or Director

Date