

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005578

FILED
Mar 21, 2005
Secretary of State

Entity Name: BURN SURVIVORS THROUGHOUT THE WORLD, INC.

Current Principal Place of Business:

650 N. BENEVA ROAD
#305
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

650 N. BENEVA ROAD
#305
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 94-3403785 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

APPLEMAN, MICHAEL
650 N. BENEVA ROAD
#305
SARASOTA, FL 34232 US

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

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: APPLEMAN, MICHAEL
Address: 650 N. BENEVA RD #305
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: BOMBERRY, VICTORIA
Address: 650 N. BENEVA ROAD #305
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: NGUYEN, DIEU TRAN T
Address: 650 N. BENEVA ROAD #305
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: GONZALEZ, ARIEL
Address: 650 N BENEVA ROAD #305
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: NGUYEN, THIEN C
Address: 650 N. BENEVA ROAD #305
City-St-Zip: SARASOTA, FL 34232

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 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: MICHAEL APPLEMAN

CEO

03/21/2005

Electronic Signature of Signing Officer or Director

Date