

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002266

FILED
Feb 14, 2004
Secretary of State

Entity Name: WORLD TECHNOLOGY & TRADE CHAMBER OF COMMERCE CORP.

Current Principal Place of Business:

5557 W. OAKLAND PARK BLVD.
SUITE 1000
FORT LAUDERDALE, FL 33317

New Principal Place of Business:

P O BOX 5843
FORT LAUDERDALE, FL 33310

Current Mailing Address:

POST OFFICE BOX 5843
FORT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 04-3629472 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

BERNHARD, SCHUTTE
P O BOX 5843
FORT LAUDERDALE, FL 33310 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: TBS

02/14/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHUTTE, BERNHARD T
Address: 1900 WEST COMMERCIAL BOULEVARD SUITE 124
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VSD () Delete
Name: BERNTHALER, THOMAS
Address: 1900 WEST COMMERCIAL BOULEVARD SUITE 124
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VTD () Delete
Name: WITTMANN, MATTHIAS
Address: 1900 WEST COMMERCIAL BOULEVARD SUITE 124
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHUTTE, BERNHARD T
Address: P O BOX 5843
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: VSD (X) Change () Addition
Name: BERNTHALER, THOMAS
Address: P O BOX 5843
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: VTD (X) Change () Addition
Name: WITTMANN, MATTHIAS
Address: P O BOX 5843
City-St-Zip: FORT LAUDERDALE, FL 33310

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: TBS

PD

02/14/2004

Electronic Signature of Signing Officer or Director

Date