## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000002266

Address:

City-St-Zip:

P O BOX 5843

FORT LAUDERDALE, FL 33310

FILED Oct 24, 2006 Secretary of State

Entity Name: WORLD TECHNOLOGY & TRADE CHAMBER OF COMMERCE CORP. **Current Principal Place of Business: New Principal Place of Business:** P O BOX 5843 FORT LAUDERDALE, FL 33310 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 5843 FORT LAUDERDALE, FL 33310 FEI Number: 04-3629472 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: BERNHARD, SCHUTTE BERNHARD, SCHUTTE P O BOX 5843 3650 INVERRARY DRIVE FORT LAUDERDALE, FL 33310 US G-2-P FORT LAUDERDALE, FL 33319 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: BERNHARD SCHUTTE 10/24/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition SCHUTTE, BERNHARD T Name: Name: P O BOX 5843 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33310 City-St-Zip: Title: VSD () Delete Title: VSD (X) Change ( ) Addition Name: BERNTHALER, THOMAS Name: BERNTHALER, THOMAS Address: P O BOX 5843 Address: P O BOX 5843 City-St-Zip: FORT LAUDERDALE, FL 33310 City-St-Zip: FORT LAUDERDALE, FL 33310 Title: VTD () Delete Title: () Change () Addition WITTMANN, MATTHIAS Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: BERNHARD SCHUTTE CEO 10/24/2006