

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90064 002 ****70.00

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1. Entity Name

**WORLD FOUNDATION FOR SCIENCE, FINANCE AND
DEVELOPMENT, II, INC.**



Principal Place of Business

**291 BAL BAY DRIVE
BAL HARBOUR FL 33154**

Mailing Address

**291 BAL BAY DRIVE
109
BAL HARBOUR FL 33154**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ADES, DONNA
C/O LAW OFFICES OF KEN LANGE
1125 N E 125 STREET SUITE 301
NORTH MIAMI FL 33161**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GOODMAN, ARTHUR ☐ Delete
STREET ADDRESS 291 BAL BAY DRIVE
CITY-ST-ZIP BAL HARBOR FL 33154

TITLE VPD
NAME COPPOCK, DONALD R ☒ Delete
STREET ADDRESS 902 CAMILLIA ROAD
CITY-ST-ZIP ONEONTA AL 33121

TITLE TD
NAME LIEVANA, IRENE G ☐ Delete
STREET ADDRESS 2600 N E 135 STREET, #3B
CITY-ST-ZIP N. MIAMI FL 33181

TITLE SD
NAME ADES, DONNA ☐ Delete
STREET ADDRESS 1125 N E 125 STREET, #301
CITY-ST-ZIP N. MIAMI FL 33161

TITLE ATD
NAME GOODMAN, ARTHUR ☐ Delete
STREET ADDRESS 291 BAL BAY DR #109
CITY-ST-ZIP BAL HARBOUR FL

TITLE ASD
NAME COPPOCK, DONALD R ☒ Delete
STREET ADDRESS 902 CAMILLA RD
CITY-ST-ZIP ONEONTA AL 33121

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DIRECTOR COMPLIANCE ☐ Change ☒ Addition
NAME VENETTIE, THOMAS
STREET ADDRESS 680 PEAR TREE LANE
CITY-ST-ZIP GROSE POINT WOODS, MI. 48236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Arthur Goodman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/04 (305) 861-8489.

Date

Daytime Phone #