

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005358

FILED
Jun 30, 2006
Secretary of State

Entity Name: WORLD FOUNDATION FOR SCIENCE, FINANCE AND DEVELOPMENT, II, INC.

Current Principal Place of Business:

291 BAL BAY DRIVE
BAL HARBOUR, FL 33154

New Principal Place of Business:

Current Mailing Address:

291 BAL BAY DRIVE
109
BAL HARBOUR, FL 33154

New Mailing Address:

FEI Number: 11-3668975 **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:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOODMAN, ARTHUR
Address: 291 BAL BAY DRIVE
City-St-Zip: BAL HARBOR, FL 33154

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

Title: DC (X) Delete
Name: VENETTIS, THOMAS
Address: 680 PEAR TREE LANE
City-St-Zip: GROSSE POINTE, MI 48236

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

Title: TD () Delete
Name: LIEVANA, IRENE G
Address: 1125 NE 125 STREET, # 301
City-St-Zip: MIAMI, FL 33161

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

Title: SD () Delete
Name: ADES, DONNA
Address: 1125 N E 125 STREET, #301
City-St-Zip: N. MIAMI, FL 33161

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

Title: ATD () Delete
Name: GOODMAN, ARTHUR
Address: 291 BAL BAY DR #109
City-St-Zip: BAL HARBOUR, FL

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

Title: DC (X) Delete
Name: PETRILLO, RONALD A
Address: 6801 NW 6TH STREET
City-St-Zip: PLANTATION, FL 33137

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: ARTHUR GOODMAN

ATD

06/30/2006

Electronic Signature of Signing Officer or Director

Date