

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90020 047 ****70.00

DOCUMENT # N03000000021

1. Entity Name

WORLD CHILDREN RESCUE, INCORPORATED



Principal Place of Business

5200 NW 18 PL
LAUDERHILL FL 33313

Mailing Address

5200 NW 18 PL
LAUDERHILL FL 33313



2. Principal Place of Business - No P.O. Box #

1520 NW 9th AVE

Suite, Apt. #, etc.

3. Mailing Address

1520 NW 9th AVE

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

FF. LAUDERDALE

Zip

33301

Country

BROWARD

City & State

FF. LAUDERDALE FLA

Zip

33311

Country

BROWARD

4. FEI Number

06-1672469

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARDEN, JONATHAN M
5200 NW 18TH PLACE
LAUDERHILL FL 33313

7. Name and Address of New Registered Agent

Name

JONATHAN HARDEN

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

1520 NW 9th AVE.

City

FF. LAUDERDALE

FL

Zip Code

33311

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

Jonathan Harden

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-29-08

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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	P	<input checked="" type="checkbox"/> Delete
NAME	HARDEN, JONATHAN	
STREET ADDRESS	5200 NW 18TH PLACE	
CITY-ST-ZIP	LAUDERHILL FL 33313	2-29-08
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	JONATHAN HARDEN	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		
STREET ADDRESS	1520 NW 9th AVE	
CITY-ST-ZIP	FF. LAUDERDALE FLA 33311	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Jonathan Harden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-08

Date

Signature Page #