2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000041

FILED May 22, 2008 Secretary of State

Entity Name: WORLD CARE VISION INTERNATIONAL, CORP.

Current Principal Place of Business: New Principal Place of Business:

1425 NW 192ND TERRACE 1717 NE 2 AVE

MIAMI, FL 33169 DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

8757 BAYSTONE COVE 1425 NW 192 TERR BOYNTON BEACH, FL 33437 MIAMI, FL 33169

FEI Number: 65-7204697 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:

DIEUVIL, GUILFORT DIEUVIL, GILLIAN 1425 NW 192ND TERRACE 1425 NW 192ND TERRACE MIAMI, FL 33169 MIAMI, FL 33169

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.

City-St-Zip:

SIGNATURE: BISHOP, GILLIAN DIEUVIL 05/22/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

MIAMI, FL 33168

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BOYNTON BEACH, FL 33426

(X) Change () Addition () Delete

DIEUVIL, GUILFORT DIEUVIL, GILLIAN Name: Name: Address: 1425 NW 192ND TERRACE Address: 1425 NW 192ND TERRACE

City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169

Title: Title: (X) Change () Addition () Delete DIEUVILLE, JEAN JUSTE ADVISOR

Name: Name: DIEUVILLE, JEAN JUSTE Address: 1017 NW 192 TERR Address: 1200 SW 27 PLACE

Title: () Delete Title: SD (X) Change () Addition

DIEUVIL, MAGDADENE DIEUVIL, JACQUES Name: Name: 18425 NW 7TH AVE. 1425 NW 192 TERR Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169

Title: () Delete Title: () Change (X) Addition

Name: Name: DUVAL, FENJY Address: Address: 1200 SW 27 PLACE

City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33426

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: GILLIAN DIEUVIL 05/22/2008