

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005232

FILED
Apr 30, 2008
Secretary of State

Entity Name: WORLDWIDE WELLNESS ORGANIZATION CORP.

Current Principal Place of Business:

1732B ROOSEVELT STREET
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

1732B ROOSEVELT STREET
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCELINO, CAMELIA A ESQ
99 EAST MARBRISA WAY
BUENA VENTURA LAKES, FL 34743 US

Name and Address of New Registered Agent:

STEWART, BECKI
1732B ROOSEVELT STREET
HOLLYWOOD, FL 33020 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: BECKI STEWART

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARCELINO, CAMELIA A ESQ
Address: 99 EAST MARBRISA WAY
City-St-Zip: BUENA VENTURA LAKES, FL 34743 US

Title: VP () Delete
Name: STEWART, BECKI
Address: 1732B ROOSEVELT STREET
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: S TR (X) Delete
Name: MURRAY, ALISON
Address: 617 JAMES CIRONE WAY
City-St-Zip: HERNDON, VA 20170 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEWART, BECKI
Address: 1732B ROOSEVELT STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: S TR (X) Change () Addition
Name: MURRAY, ALISON
Address: 617 JAMES CIRONE WAY
City-St-Zip: HERNDON, VA 20170 US

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

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.

SIGNATURE: BECKI STEWART

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date