


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

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90039 002 ****75.00

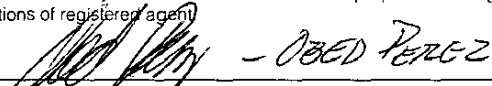
DOCUMENT # N95000002888	
1. Entity Name WORLD-WIDE MISSIONARY AND EVANGELISTIC ADVANCE, INC.	

Principal Place of Business 5934 BENT PINE DRIVE ORLANDO FL 32822 US	Mailing Address P.O. BOX 620892 ORLANDO FL 32862
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2. Principal Place of Business 5040 LAKE UNDERHILL	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ORLANDO FL.	City & State
Zip 32807	Country ORANGE

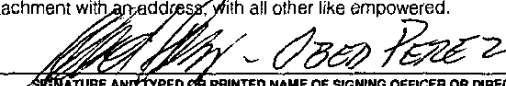
6. Name and Address of Current Registered Agent ORTIZ, REBECCA 11300 OLD HAVOR RD ORLANDO FL 32862	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  - OBED PEREZ	DATE 3-10-04

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D LOPEZ, NATALIO 5934 BENT PINE DR ORLANDO FL 32822
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D ORTIZ, REBECCA 5934 BENT PINE DR ORLANDO FL 32822
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D PEREZ, OBED 1015 RAINBOW DR ORLANDO FL 32809
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D GONZALEZ, FRANCISCO 1015 RAINBOW DR ORLANDO FL 32809
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D PINEDA, JACOBO 1015 RAINBOW DR ORLANDO FL 32809
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D LOPEZ NATALIO 5040 LAKE UNDERHILL ORLANDO FL. 32807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D ORTIZ REBECCA 5934 BENT PINE DR ORLANDO FL. 32807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D PEREZ OBED 9204 GREAT SOUND DR. ORLANDO, FL. 32827
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D GONZALEZ FRANCISCO 9204 GREAT SOUND DR. ORLANDO, FL. 32827
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D PINEDA JACOB 9204 GREAT SOUND DR. ORLANDO FL. 32827
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  - OBED PEREZ	DATE 3-10-04 (407) 816-1395