2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000004244

Entity Name: WORLD WIDE REFUGEE & RELIEF SERVICES, INC.

FILED May 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
19711 NW MIAMI, FL	5TH AVENUE 33169				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
19711 NW MIAMI, FL	5TH AVENUE 33169				
FEI Number:	65-0938332	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Co	urrent Registered Agent:	Name and Address	of New Registered Agent:	
19711 N.W MIAMI, FL	named entity s		rpose of changing its register	ed office or registered agent, or both,	
SIGNATUR					
SIGNATOR		c Signature of Registered Agen	t	 Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () STEFANOS, ZEF 19711 N.W. 5TH MIAMI, FL 3316	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KARAKAS, OME 8920 N.W. 8TH S MIAMI, FL 3317	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () STEFANOS, KUF 341 N.W.206TH MIAMI, FL 3316	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I GEBI, TAMUNA 1105 N.W. 16TH MIAMI, FL 3313		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I RONKE, AGEKE 12905 S.W. 104 MIAMI, FL 3319	TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ZEREZGHI STEFANOS P 05/02/2002