

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000004244

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

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

Current Principal Place of Business:

19711 NW 5TH AVENUE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

19711 NW 5TH AVENUE
MIAMI, FL 33169

New Mailing Address:

FEI Number: 65-0938332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZEREZGHI, STEFANO S
19711 N.W. 5TH AVENUE
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEFANOS, ZEREZGHI
Address: 19711 N.W. 5TH AVENUE
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: KARAKAS, OMER
Address: 8920 N.W. 8TH STREET
City-St-Zip: MIAMI, FL 33172

Title: T () Delete
Name: STEFANOS, KUFLU
Address: 341 N.W.206TH STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: GEBI, TAMUNA
Address: 1105 N.W. 16TH AVE
City-St-Zip: MIAMI, FL 33136

Title: D () Delete
Name: RONKE, AGEKENI
Address: 12905 S.W. 104TH STREET
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

Electronic Signature of Signing Officer or Director

_____ Date