

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009998

Entity Name: WORLD CALL CENTER, INC.

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

1432 BRICKELL AVENUE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

601 BRICKELL KEY DRIVE
SUITE 705
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0999234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA PENA & ASSOCIATES, P.A.
601 BRICKELL KEY DRIVE SUITE 705
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: OLLOQUI, RAFAEL
Address: 1432 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: PD () Delete
Name: OLLOQUI, RICARDO
Address: 1432 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: PROANO, ANDRES
Address: 1432 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: DE LE PENA D., LEONCIO E
Address: 601 BRICKELL KEY DRIVE, STE 705
City-St-Zip: MIAMI, FL 33131

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONCIO E DE LA PEÑA

SD

04/23/2004

Electronic Signature of Signing Officer or Director

_____ Date