

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90052 027 ***150.00

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1. Entity Name
EXPANDING WORLD, CORP.



Principal Place of Business

**1978 NE 149 STREET
MIAMI, FL 33181**

Mailing Address

**1978 NE 149 STREET
#616
MIAMI, FL 33181**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

1978 NE 149 STREET

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip

Country

Zip

Country

33181

USA

04052005

Chg-P

CR2E034 (10/03)

4. FEI Number

65-1041020

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**SCHUIMERINI, JUAN C
633 N.E. 167TH STREET
#616
NORTH MIAMI BEACH, FL 33162**

7. Name and Address of New Registered Agent

Name **SCHUIMERINI JUAN C.**

Street Address (P.O. Box Number is Not Acceptable)

1978 NE 149 STREET

City **MIAMI**

FL

Zip Code **33181**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **DONATI, JORGE L**
STREET ADDRESS **17050 N. BAY ROAD #403**
CITY-ST-ZIP **SUNNY ISLES BEACH, FL 33160**

TITLE **D** ☐ Delete
NAME **SCHUIMERINI, JUAN C**
STREET ADDRESS **633 N.E. 167TH STREET #616**
CITY-ST-ZIP **NORTH MIAMI BEACH, FL 33162**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **DONATI JORGE L.**
STREET ADDRESS **1978 NE 149 STREET**
CITY-ST-ZIP **MIAMI FL 33181**

TITLE **D** ☒ Change ☐ Addition
NAME **SCHUIMERINI JUAN C**
STREET ADDRESS **1978 NE 149 STREET**
CITY-ST-ZIP **MIAMI FL 33181**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

DONATI JORGE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-05

Date

3059477778

Daytime Phone #