

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106811

FILED
Apr 16, 2008
Secretary of State

Entity Name: WORLD TRADE ALLIANCE CORPORATION

Current Principal Place of Business:

2100 SW 97TH LANE
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

2100 SW 97TH LANE
DAVE, FL 33324

New Mailing Address:

2100 SW 97TH LANE
DAVIE, FL 33324

FEI Number: 65-1056213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOELKE, ELIZABETH Y
9138 SW 157 CT
MIAMI, FL 33196 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: VPST () Delete
Name: LOELKE, ELIZABETH YI
Address: 9138 S W 157TH COURT
City-St-Zip: MIAMI, FL 33179

Title: PD () Delete
Name: LOELKE, CARSTEN
Address: 1602 ALTON ROAD #65
City-St-Zip: MIAMI BEACH, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: LOELKE, CARSTEN
Address: 1602 ALTON RD #65
City-St-Zip: MIAMI BEACH, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ELIZABETH LOELKE

VPST

04/16/2008

Electronic Signature of Signing Officer or Director

Date