

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91333 003 ***150.00

DOCUMENT #

1. Entity Name

P010000040831

Word Wonder Wisdom, Inc.

DO NOT WRITE IN THIS SPACE

668548

2. Principal Place of Business

100 SE 2 St.

Suite, Apt. #, etc.

17th Floor

City & State

Miami, FL 33131

Zip

33131

Country

3. Mailing Address

c/o Howard Gordon

Suite, Apt. #, etc.

100 SE 2 St. 17th Floor

City & State

Miami, FL

Zip

33131

Country

4. FEI Number

65-1099565

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Howard Gordon

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

100 S.E. 2 Street, 17th Floor

City

Miami

FL

Zip Code

33131

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Valerie Taylor - president
c/o Howard Gordon
100 SE 2 Street, 17th Floor
Miami, FL 33131

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Valerie Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 30, 2002 303-789-9200

Date

Daytime Phone: #