

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078646

Entity Name: GIFT WORLD, INC.

FILED  
Jan 11, 2008  
Secretary of State

**Current Principal Place of Business:**

1119 NW 143 AVE  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

1119 NW 143 AVE  
PEMBROKE PINES, FL 33028 US

**New Mailing Address:**

FEI Number: 65-112892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARBOSA, FLAVIA S  
1119 NW 143 AVE  
PEMBROKE PINES, FL 33028 US

**Name and Address of New Registered Agent:**

BARBOSA, FLAVIA  
1119 NW 143 AVE  
PEMBROKE PINES, FL 33028 US

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: FLAVIA BARBOSA

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BARBOSA, FLAVIA S  
Address: 1119 NW 143 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BARBOSA, FLAVIA  
Address: 1119 NW 143 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

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: FLAVIA BARBOSA

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date