FILED Apr 29, 2002 8:00 am Secretary of State

04-29-2002 90127 017 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P01000093265 1. Entity Name

WORLDWIDE PRECIOUS METALS CORPORATION

Principal Place of Business

CITY-ST-ZIP

1555 PALM BEACH LAKES BLVD. 1510

WEST PALM BEACH FL 33401

Mailing Address

1555 PALM BEACH LAKES BLVD. 1510

WEST PALM BEACH FL 33401

2. Principal Place of Business 2776 UNIVERSITY	3. Mailing Address 2774 / Wiveks	Ty I've.			
Suite, Apt. #, etc. THE WALK Suite, Apt. #, etc. THE WALK			DO NOT WRITE IN	THIS SPACE	
CORAL JARINGS FLA CITY & State CHALDARINGS		s FLA	4. FEI Number 65-1140296	 - - 	oplied For ot Applicable
33065 Country USA	33065	U&A		\$8.75 Add	ditional d
6. Name and Address of Current R		7. Name and Address of New Regis	tered Agent		
LESHER, GERALD S 1555 PALM BEACH LAKES BLVD., SUITE 1510 WEST PALM BEACH FL 33401		Street Address (P.O. Box Number is Not Acceptable) THE WACK			
		2776 University De.			
		CSKAL S	BRNES	FL Zing	PC /
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 HAROLA SEICEL RESIDENT SIgnature, typed or printed name of registered agent and	U LAST	egistered Agent signature require	d when reinstating)	DATE	
			- Wienings (Eding)	DATE	<u> </u>
		FEE IS \$150.00 Fee will be \$550.00 to Department of Sta	10. Election Campaign Financin Trust Fund Contribution.	~ _ \	May Be to Fees
11. OFFICERS AND DI	RECTORS	12.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS	3 IN 11
TITLE PRESIDEDE	☐ Delete	TITLE		☐ Change	☐ Addition
NAME HAROLD SEIGEL	,	NAME		_ ,	_ ;
STREET ADDRESS 2776 UPLYSTES TY DE COURAL SARINGS FL	3361	STREET ADDRESS CITY-ST-ZIP			
TITLE V.P. SECKETARY - THE	AS WERT DOLL	TITLE		D 0h	[T] +4200
NAME CARLOS MORNENE	Delete	NAME		☐ Change	Addition 6
STREET ADDRESS 3776 UNIVERSITY D	121VE _	STREET ADDRESS			
CITY-ST-ZIP CORAL SOIR WES FC	33065	CITY-ST-ZIP	·		
THILE I'M TO THE STATE OF THE S	Delete Delete	-TITLE	e de cras de company de la com	Change	Addition -
NAME STREET ADDRESS : .		NAME			
CITY-ST-ZIP	,	STREET ADDRESS CITY-ST-ZIP			}
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STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP			
TITLE	□ Delete	TITLE		Change	☐ Addition
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STREET ADDRESS		STREET ADDRESS			

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

Heold deieel **SIGNATURE:** SIGNATURE AND TYPED OR PRINTED NAME OF GING OFFICER OR DIRECTOR