## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 01, 2006 8:00 am Secretary of State

DOCUMENT # P02000108537  1. Entity Name IGL WORLDWIDE, INC.									05-01-200	90406	042 ***150	0.00
Principal Plac 7979 NW 21 MIAMI, FL 3	ST ST	s	79	ailing Address 979 NW 21ST ST IAMI, FL 33122		,	j	.'	100,00	<b>~</b> ; <b>~</b>		
2. Principal Place of Business				3. Mailing Address 1598 NW 82 Ave								
1598 NW 82 Ave Suite, Apt. #, etc.				1598 NW 83				04252006	Chg-P	CR2E	E034 (11/05)	
City & State M. Omi FL			City & State F			-L		4. FEI Numb			<u> </u>	plied For
. Zip 3312	ع د	Country U.5. A	3 <sup>2</sup>	3126	Cour	5. A	•	<u> </u>	of Status Desired		\$8.75 Add Fee Required	
	6. Name	and Address of Current	Regist	tered Agent		Name		7. Name and	d Address of New	/ Registered	1 Agent	
TORRENS, FRANCISCO J 1695 OSPREY BEND WESTON, FL 33327						Street Address (P.O. Box Number is Not Acceptable)						
WESTON,	FL 3332							•	•	,		
										F	L Zip Code	э
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 renstating)  DATE												
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.								.00 May Be ed to Fees				
10.		OFFICERS AND	DIREC	TORS	11.			ADDITIONS	/CHANGES TO O	FFICERS AN	ND DIRECTORS	S IN 11
TITLE	D			☐ Delete	TITL	1					Change	☐ Addition
NAME Street Address City-St-Zip	TORRENS, FRANCISCO J						150 We	eston	CtoriA FL =	; 工s 333a	le wo	ry
TITLE				☐ Delete	TITL	E		, , , , ,	,		☐ Change	Addition
NAME	NAM CID											
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS (-ST-ZIP						
TITLE				Delete	TITE	1					Change	☐ Addition
NAME Street Address						EET ADDRESS						ļ
CITY-ST-ZIP					CITY	r-St-ZIP						
TITLE				Delete	TITL	·- I					☐ Change	☐ Addition
NAME STREET ADDRESS					NAM STRI	AE EET ADDRESS						
CITY-ST-ZIP		**************************************				r-\$1-ZIP						
TITLE				☐ Delete	TITL	1					☐ Change	☐ Addition
NAME Street address					NAM STRE	EET ADDRESS						
CITY-ST-ZIP					CITY	r-ST-ZIP						
TITLE			Λ	☐ Delete	TITL						Change	Addition
NAME STREET ADDRESS		,	-I		NAM STRI	EET ADDRESS						
CITY-ST-ZIP			Ш		- I	r-\$f-ZIP			·			
12. I hereby certify that the information supplies with the dilling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report of the the accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or fusited explored that 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 withan address grittlell other like expowered.												
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Javier Torren 4/24/06 305)  Ogto Designing Proce of Designing Procesor Designing Proces												
		SIGNATURE AND TYPED OR F	HINTEU	MARK OF BIGNING OFFICER	. ON DIREC	, OR			Othe		ANGULAR PIKKNO A	