

P03000044191

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R/A Chg.
upm
7/30/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MY WORLD, INC
(Name of corporation)

DOCUMENT NUMBER: P030 0004 4191

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MUKARRAM MALWOOD
(Name of person)

MY WORLD, INC
(Name of firm/company)

22375 S.W. 66th AVE, #1408
(Address)

BOCA RATON, FL 33428
(City/state and zip code)

For further information concerning this matter, please call:

MUKARRAM MALWOOD at (954) 899-8130
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



My World, Inc.

**Your Link
to
College Promotions**

- Flying
- Dormitories
- Classrooms
- On campus events
- Tabling
- Positional advertising
- Vendor sites on campus
- Cafeteria and food courts
- Seminars on product education
- Off campus student apartment complexes

1501 NW 2nd Av. Ste 1
Boca Raton, FL 33432

Tel (561) 302-0082
(954) 899-8130
Fax (561) 883-1774

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Attached to this letter is a "Statement of Change of Registered Agent". I would greatly appreciate it if this amendment is filed in the Articles of Incorporation. I am also enclosing the following:

- Check # 128 in the amount of \$35.00 for the Amendment
- Check # 129 in the amount of \$8.75 for a certified copy of the Articles of incorporation **including the new amendment**. I had a conversation with an employee of the Certification office named **Debi Gilliard** who instructed me to send the check along with this document to ensure that **I get a certified copy of the articles of Incorporation with the new amendment**. She assured me that such a request would be honored. I also wish to state that she was extremely cordial and helpful in this process.
- Please mail the certified copy of the articles of Incorporation **with new amendment** to the following address:

Mukarram Mawjood
22375 S.W. 66th Ave.,
#1408
Boca Raton, FL 33428

Thanking You

Mukarram Mawjood
President


My World, Inc.

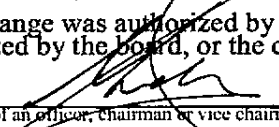
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MY WORLD, INC
2. The principal office address: 1501 N.W. 2nd AVE, SUITE #1
BOCA RATON FL 33432
3. The mailing address (if different): 22375 S.W. 66th AVE
#1408, BOCA RATON FL 33428
4. Date of incorporation/qualification: 04/21/2003 Document number: P03000044191
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
VELJKO NIKOLIC
480 NW 20th STREET, #202
BOCA RATON FL, 33431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MUKARRAM MAWDOOD
22375 S.W. 66th AVE, #1408
(P.O. Box or personal mailbox NOT acceptable)
BOCA RATON FL 33428

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer, chairman or vice chairman of the board)

MUKARRAM MAWDOOD - PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

07/22/03
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA