
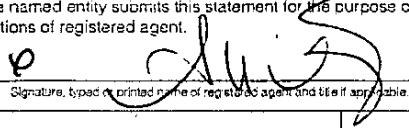
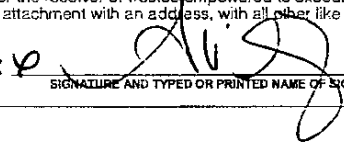


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 8:00 am
Secretary of State

02-03-2006 90020 005 ***150.00

DOCUMENT # P03000092028 1. Entity Name RECOM WORLDWIDE, INC.					
Principal Place of Business 12241 S DIXIE HWY MIAMI, FL 33156				Mailing Address 12241 S DIXIE HWY MIAMI, FL 33156	
2. Principal Place of Business 8201 SW 124 ST.		3. Mailing Address 8201 SW 124 ST.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MIAMI FL		City & State MIAMI FL		4. FEI Number 20-0212100	
Zip 33156		Country MIAMI DADE		Applied For <input type="checkbox"/> Not Applicable	
Zip 33156		Country MIAMI DADE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH, SYLVIA 12241 S DIXIE HWY MIAMI, FL 33156				7. Name and Address of New Registered Agent Name SMITH, SYLVIA Street Address (P.O. Box Number is Not Acceptable) 8201 SW 124 ST. City MIAMI FL 33156	
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  (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, SYLVIA 12241 S DIXIE HWY MIAMI, FL 33156	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, SYLVIA 8201 SW 124 ST. MIAMI FL 33156	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUI, ROBERT 12205 SW 85TH CT MIAMI, FL 33157	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUI, ROBERT 12205 SW 85TH CT. MIAMI FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____ Daytime Phone # _____		

ATTACHMENT 40008767

PRINCETON PROFESSIONAL SERVICES
13011 SW 259 STREET
P.O. BOX 924342 HOMESTEAD, FL 33032
(305) 258-5670

DATE: 1/16/06

DO NOT MAIL THIS INSTRUCTION SHEET WITH YOUR ORIGINAL DOCUMENTS

FORM NO. Corp Annual Report YEAR ENDED: 2006

TAXPAYER: Recon Worldwide

MAIL ON OR BEFORE: 4/15/06

*Change address -
Correct 5015 have
Final copy -*

PLEASE FOLLOW INSTRUCTIONS AS CHECKED

☒ PLEASE SIGN AT (X) 4 places
☐ INDICATE TITLE AT (X)
☐ NO REMITTANCE NECESSARY-REFUND \$
☒ WRITE CHECK IN THE AMOUNT OF \$ 150.00 DUE: 4/15/06

MAKE CHECK PAYABLE TO:

☐ UNITED STATES TREASURY
☐ FLORIDA UNEMPLOYMENT COMPENSATION FUND
☐ FLORIDA DEPARTMENT OF REVENUE
☒ YOUR BANK WITH FEDERAL DEPOSITORY COUPON FOR: _____
☒ FLORIDA DEPARTMENT OF STATE

MAIL SIGNED DOCUMENTS TO:

☐ INTERNAL REVENUE SERVICE CENTER, OGDEN, UT 84201-0005
☐ FLORIDA DEPT. OF REVENUE, 5050 W. TENNESSEE STREET
TALLAHASSEE, FL 32399-0125
☐ FLORIDA DEPT. OF REVENUE, UNEMPLOYMENT TAX
5050 W. TENNESSEE STREET
TALLAHASSEE, FL 32399-0125
☒ DIVISION OF CORPORATIONS- ANNUAL REPORTS SECTION
P.O. BOX 1500,
TALLAHASSEE, FL 32302-1500