2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# P03000097332

Entity Name: WORLD WIDE STUDENT LOAN CONSOLIDATION, INC.

Current Principal Place of Business:

4125 W WATERS AVE
TAMPA, FL 33614

New Principal Place of Business:

4030 WINDTREE DR.
TAMPA, FL 33624

Current Mailing Address:

4125 W WATERS AVE
TAMPA, FL 33614

New Mailing Address:

4030 WINDTREE DR.
TAMPA, FL 33624

FEI Number: 20-0214906 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, LUIS M
4125 W WATERS AVE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

PEREZ, LUIS M
4030 WINDTREE DR.
TAMPA, FL 33624 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: _____ 04/30/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: PEREZ, LUIS M
Address: 4125 W WATERS AVE
City-St-Zip: TAMPA, FL 33614

Title: V ( ) Delete
Name: PEREZ, NICHOLE M
Address: 4125 W WATERS AVE
City-St-Zip: TAMPA, FL 33614

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: PEREZ, LUIS M
Address: 4030 WINDTREE DR.
City-St-Zip: TAMPA, FL 33624

Title: V (X) Change ( ) Addition
Name: PEREZ, NICHOLE M
Address: 4030 WINDTREE DR.
City-St-Zip: TAMPA, FL 33624

Title: CFO ( ) Change (X) Addition
Name: PEREZ, CAROL P
Address: 4030 WINDTREE DR.
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROL P PEREZ CFO 04/30/2005
Electronic Signature of Signing Officer or Director — Date