

# **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000097332

**FILED**  
**Aug 21, 2006**  
**Secretary of State**

**Entity Name:** WORLD WIDE STUDENT LOAN CONSOLIDATION, INC.

**Current Principal Place of Business:**

4030 WINDTREE DR.  
TAMPA, FL 33624

**New Principal Place of Business:**

4339 GUNN HIGHWAY  
TAMPA, FL 33618

**Current Mailing Address:**

4030 WINDTREE DR.  
TAMPA, FL 33624

**New Mailing Address:**

4339 GUNN HIGHWAY  
TAMPA, FL 33618

**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  
4030 WINDTREE DR.  
TAMPA, FL 33624 US

**Name and Address of New Registered Agent:**

PEREZ, LUIS M  
4339 GUNN HIGHWAY  
TAMPA, FL 33618 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: \_\_\_\_\_

08/21/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: PEREZ, LUIS M  
Address: 4339 GUNN HIGHWAY  
City-St-Zip: TAMPA, FL 33618

Title: CFO (X) Change ( ) Addition  
Name: PEREZ, CAROL P  
Address: 4339 GUNN HIGHWAY  
City-St-Zip: TAMPA, FL 33618

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LUIS M. PEREZ

CEO

08/21/2006

Electronic Signature of Signing Officer or Director

Date