

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000012267

1. Entity Name
CAPITAL WORLD WIDE VENTURES INC.



Principal Place of Business
533 NORMAN DRIVE
TALLAHASSEE, FL 32304

Mailing Address
533 NORMAN DRIVE
TALLAHASSEE, FL 32304

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05012008

Chg-P

CR2E034 (12/06)

4. FEI Number
59-3778209

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, BEN
654 DUB RD
TALLAHASSEE, FL 32310

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VCHR
LUGISSE, ARTHUR
533 NORMAN DRIVE
TALLAHASSEE, FL 32304 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
RIOS, JESSIE
6156 OLD FEDERAL ROAN
QUINCY, FL 32351 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
IC
OLIVACCE, ANTHONY
533 NORMAN DRIVE
TALLAHASSEE, FL 32304 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
EAS
BUTLER, WILLIE
533 NORMAN DRIVE
TALLAHASSEE, FL 32304 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
FA ~~THUNDER~~
LUGISSE, ARTURO A
533 NORMAN DRIVE
TALLAHASSEE, FL 32304 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
LA
KNIGHT, STEVEN
533 NORMAN DRIVE
TALLAHASSEE, FL 32304 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
DAVID ARMSTRONG
TALLAHASSEE FL 32304
533 NORMAN DR ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
IC
TORRID OSBORNE
TALLAHASSEE
FLORIDA 533 NORMAN DR. ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
500129437475
05/14/08--01009--009 **150.00 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
500129437475
05/14/08--01009--010 **17.50 ☐ Change ☐ 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 #

FILED

08 MAY -1 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

