Apr. 27. 2005 7:17AM

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State
05-02-2005 90967 005 ***150.00

DOCUMENT # P04000015733

1. Entity Name
INTERNATIONAL WORLD CARD INC.

Principal Place of Business	Mailing Address
5026 PIMLICO COURT WEST PALM BEACH, FL 33415 US	5026 PIMLICO COURT WEST PALM BEACH, FL 33415 US

04262005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
10742 PELICAN DRIVE	10742 PELICAN DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WELLINGTON, FL	City & State: WELLINGTON, FL
Zip: 33414 Country: USA	Zip: 33414 Country: USA

4. FEI Number: 20-0649902 ☐ 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
LOPEZ, ANTONIO MR 5026 PIMLICO COURT WEST PALM BEACH, FL 33415	Name: ANGELA C. GARNITO Street Address (P.O. Box Number is Not Acceptable): 10742 PELICAN DRIVE City: WELLINGTON, FL FL Zip Code: 33414

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: _____ 4-27-05
Signature of one of the new registered agent and title, if applicable. NOTE: Registered Agent signature required when reinstating. DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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,S CALVO, ANGELA 5026PIMLICO COURT WEST PALM BEACH, FL 33415	☒ Delete	D,S CARLOS J. BADARACO 10742 PELICAN DRIVE WELLINGTON, FL 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	P MORRIS ESQUENAZI 10742 PELICAN DRIVE WELLINGTON, FL 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: CARLOS BADARACO 4-27-05 (561)8012669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #