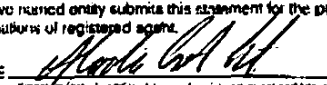
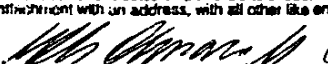


Apr. 27. 2005 7:17AM

**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 5026 PIMLICO COURT WEST PALM BEACH, FL 33415 US		Mailing Address 5026 PIMLICO COURT WEST PALM BEACH, FL 33415 US	
2. Principal Place of Business 10742 PELICAN DRIVE		3. Mailing Address 10742 PELICAN DRIVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State WELLINGTON, FL		City & State WELLINGTON, FL	
Zip 33414		Zip 33414	
Country USA		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 LOPEZ, ANTONIO MR 5026 PIMLICO COURT WEST PALM BEACH, FL 33415		7. Name and Address of New Registered Agent Name ANGELA C. GARAYTO Street Address (P.O. Box Number is Not Applicable) 10742 PELICAN DRIVE City WELLINGTON, 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	
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 5026 PIMLICO COURT WEST PALM BEACH, FL 33415	TITLE NAME STREET ADDRESS CITY- ST- ZIP	D.S. CARLOS J. BADARACO 10742 PELICAN DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	P MORRIS ESQUENAZI 10742 PELICAN DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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	