2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 27, 2006 08:00 AN Secretary of State DOCUMENT # P04000075881 1. Entity Name TRANSCEND OPPORTNUITY WORLD ORGANIZATION. INC. Principal Place of Business Mailing Address 245 NE 191 ST #3025 245 NE 191 ST #3025 N MIAMI BEACH, FL 33179 N MIAMI BEACH, FL 33179 No Chg-P 04102006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1061448 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent <u>da kalalada ja jaka sa jala, kaja sa sa ja kalik kalikuwa kajunja na pangana kanci sa sa ka</u> DO NOT WRITE ARRIEUX, ROGER 245 NE 191 ST #3025 N MIAMI BEACH, FL 33179 IN THIS SPACE 5. 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) 18110001540267 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 (5/11/06-80012-001 158.75 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE BERNARD, LILY J NAME STREET ADDRESS 245 NE 191 ST #3025 CDY-ST-21P N MIAMI BEACH, FL 33179 TITE F NAME STREET ADDRESS CITY-ST-ZIP DDE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE W.MS 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 filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplied entail report is true and accurate and that my signature shall have the same legal effect as it 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 life empowered.

FILED