## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000084015

Entity Name: WORLDWIDE CONSULTANT SERVICES, INC.

FILED May 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4005 NW 114 AVE 551 NW 129 WAY

PEMBROKE PINES, FL 33028

DORAL, FL 33178

**New Mailing Address: Current Mailing Address:** 

4005 NW 114 AVE 551 NW 129 WAY

PEMBROKE PINES, FL 33028 DORAL, FL 33178

FEI Number: 20-1172213 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MAIRA, VICUNA MAIRA, VICUNA 551 NW 129 WAY 4301 SW 160 AVE

PEMBROKE PINES, FL 33028 200 US

MIRAMAR, FL 33027 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: MAIRA VICUNA 05/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

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

Title: () Delete Title: (X) Change ( ) Addition

ZAMORA, MIREYA VICUNA, ZEUS Name: Name: 551 NW 129 WAY 15375 SW 104 TERRACE #5 Address: Address:

City-St-Zip: MIAMI, FL 33196 City-St-Zip: PEMBROKE PINES, FL 33028

( ) Delete Title: Title: (X) Change ( ) Addition Name: VICUNA, MAIRA Name: VICUNA, MAIRA

4301 SW 114 AVE # 200 Address: 551 NW 129 WAY Address:

MIRAMAR, FL 33027 PEMBROKE PINES, FL 33028 City-St-Zip: 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: MAIRA VICUNA 05/01/2006 D