

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123823

Entity Name: WORLDWIDE STAGE, INC.

FILED  
Apr 26, 2009  
Secretary of State

## Current Principal Place of Business:

5039 82ND WAY E  
SARASOTA, FL 34243

## New Principal Place of Business:

3905 SOUTH SHADE AVENUE  
SARASOTA, FL 34231

## Current Mailing Address:

5039 82ND WAY E  
SARASOTA, FL 34243

## New Mailing Address:

3905 SOUTH SHADE AVENUE  
SARASOTA, FL 34231

FEI Number: 20-3145068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOLFE, BURTON  
5039 SAND WAY EAST  
SARASOTA, FL 34243 US

## Name and Address of New Registered Agent:

WOLFE, BURTON  
3905 SOUTH SHADE AVENUE  
SARASOTA, FL 34231 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/26/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WOLFE, BURTON  
Address: 5039 82ND WAY E  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: WONG, LAWRENCE  
Address: 5039 82ND WAY E  
City-St-Zip: SARASOTA, FL 34243

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WOLFE, BURTON  
Address: 3905 SOUTH SHADE AVENUE  
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change ( ) Addition  
Name: WONG, LAWRENCE  
Address: 3905 SOUTH SHADE AVENUE  
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify 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: BURTON WOLFE

Electronic Signature of Signing Officer or Director

D

04/26/2009

Date