

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073756

FILED
Apr 28, 2006
Secretary of State

Entity Name: VIVE WORLD INC.

Current Principal Place of Business:

16300 NE 19TH AVE
227
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

16300 NE 19TH AVE
227
NORTH MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 20-2953530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.R.S. & ASSOCIATES INC.
20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHEN, MIREILLE
Address: 16300 NE 19TH AVE STE 227
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VP () Delete
Name: KURZENCWYG, MITCHELL
Address: 16300 NE 19TH AVE STE 227
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: SEC () Delete
Name: KURZENCWYG, TAMMY
Address: 16300 NE 19TH AVE STE 227
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MIREILLE COHEN

P

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date