## **2008 FOR PROFIT CORPORATION**

## Apr 14, 2008 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P05000131765 04-14-2008 90064 017 \*\*\*150.00 WORLDWIDE FUNDING INTERNATIONAL, INC. Principal Place of Business Mailing Address 2456 NORTH UMBRIA DR 2456 NORTH UMBRIA DR SANFORD, FL 32771 SANFORD, FL 32771 No Chg-P CR2E034 (11/05) 03142008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3553691 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BERNSTEIN, MELVYN 2456 NORTH UMBRIA DR SANFORD, FL 32771 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE BERNSTEIN, MELVYN NAME STREET ADDRESS 2456 NORTH UMBRIA DR SANFORD, FL 32771 CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained 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 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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS