## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 14, 2008 08:00 Al Secretary of State **DOCUMENT # P06000005764** WORLD-WIDE EQUITY INVESTMENTS, INC. Principal Place of Business Mailing Address 9500 NW 37 CT 9500 NW 37 CT CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 03062008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 14-1947197 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent WALSH, GERALD V DO NOT WRITE 9500 NW 37 CT CORAL SPRINGS, FL 33065 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 DATE (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 U000000894127 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 04/24/08-80015-018 150.00 OFFICERS AND DIRECTORS 10. PTD iITLÉ NAME WALSH, GERALD V 9500 NW 97 CT STREET ADDRESS CXY-ST-ZIP CORAL SPRINGS, FL 33065 VPSD III F WALSH, JOSEPH NAME STREET ADDRESS 9500 NW 37 CJ CORAL SPRINGS, FL 33065 CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 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 dustee 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 explowered.

SIGNATURE:

STREET AODRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/08 (954) 755-9310

**FILED**