

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071503

FILED
Mar 16, 2007
Secretary of State

Entity Name: WORLD LEISURE PARTNERS, INC.

Current Principal Place of Business:

1331 BRICKELL BAY DRIVE
APT 1601
MIAMI, FL 331313680

New Principal Place of Business:

1331 BRICKELL BAY DRIVE
APT 3507
MIAMI, FL 331313685

Current Mailing Address:

1331 BRICKELL BAY DRIVE
APT 1601
MIAMI, FL 331313680

New Mailing Address:

1331 BRICKELL BAY DRIVE
APT 3507
MIAMI, FL 331313685

FEI Number: 20-4974167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIDSON, COLSON H
1331 BRICKELL BAY DRIVE
APT 1601
MIAMI, FL 331313680 US

Name and Address of New Registered Agent:

EIDSON, COLSON H
1331 BRICKELL BAY DRIVE
APT 3507
MIAMI, FL 331313685 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:

03/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: ARON, ADAM M
Address: 1331 BRICKELL BAY DR, APT 1601
City-St-Zip: MIAMI, FL 331313680

Title: TCD () Delete
Name: ARON, ADAM M
Address: 1331 BRICKELL BAY DR, APT 1601
City-St-Zip: MIAMI, FL 331313680

Title: SCC () Delete
Name: MATTHEWS, JOSEPH M
Address: 1331 BRICKELL BAY DR, APT 1601
City-St-Zip: MIAMI, FL 331313680

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: ARON, ADAM M
Address: 1331 BRICKELL BAY DR, APT 3507
City-St-Zip: MIAMI, FL 331313685

Title: TCD (X) Change () Addition
Name: ARON, ADAM M
Address: 1331 BRICKELL BAY DR, APT 3507
City-St-Zip: MIAMI, FL 331313685

Title: SCC (X) Change () Addition
Name: MATTHEWS, JOSEPH M
Address: 1331 BRICKELL BAY DR, APT 3507
City-St-Zip: MIAMI, FL 331313685

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: ADAM M ARON

PCEO

03/16/2007

Electronic Signature of Signing Officer or Director

Date