

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071503

FILED
May 07, 2011
Secretary of State

Entity Name: WORLD LEISURE PARTNERS, INC.

Current Principal Place of Business:

1331 BRICKELL BAY DRIVE
APT 701
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

1331 BRICKELL BAY DRIVE
APT 701
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 20-4974167 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MATTHEWS, JOSEPH M MR.
COLSON HICKS
255 ARAGON
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: ARON, ADAM M MR.
Address: 1331 BRICKELL BAY DR, APT 701
City-St-Zip: MIAMI, FL 33131 US

Title: TCD
Name: ARON, ADAM M
Address: 1331 BRICKELL BAY DR, APT 701
City-St-Zip: MIAMI, FL 33131 US

Title: SCC
Name: MATTHEWS, JOSEPH M
Address: 255 ARAGON
City-St-Zip: CORAL GABLES, FL 33131 US

Title: VP
Name: ARON, ABBE K
Address: 95 BRENTWOOD DRIVE
City-St-Zip: GLENCOE, IL 60022

I hereby 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 all other like empowered.

SIGNATURE: ADAM ARON

PCEO

05/07/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date