2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 24, 2008 8:00 am Secretary of State **DOCUMENT # P06000147812** 01-24-2008 90026 008 ***158.75 EUREKA! WORLD DISCOVERIES INC. Principal Place of Business Mailing Address 31131 BACLAN DRIVE 40008883 31131 BACLAN DR WESLEY CHAPEL, FL 33544 WESLEY CHAPEL, FL 33544 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. 01162008 Chg-P CR2E034 (12/06) City & State City & State 4 FEI Number Applied For Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MOFFITT-SCOTT, VERA S Street Address (P.O. Box Number is Not Acceptable) 31131 BACLAN DR WESLEY CHAPEL, FLORIDA, FL 33544 Zip Code 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change Addition MOFFITT-SCOTT, VERA S NAME NAME STREET ADDRESS STREET ADDRESS 31131 BACLAN DR CITY-ST-ZIP WESLEY CHAPEL, FL 33544 CITY-ST-ZIP TRES ☐ Delete TITLE ☐ Change ■ Addition TITLE MOFFITT-SCOTT, VERA S NAME NAME STREET ADDRESS 31131 BACLAN DR STREET ADDRESS WESLEY CHAPEL, FL 33544 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE MOFFITT-SCOTT, VERA S NAME NAME 31131 BACLAN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL, FL 33544 CITY-ST-ZIP Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CtTY-ST-7IP ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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

FILED

Daytime Phone #