


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90080 037 ***150.00

DOCUMENT # P07000054764 1. Entity Name WORLD BUSINESS FOR HISPANICS, INC.			
Principal Place of Business 6368 SW 138 PATH MIAMI, FL 33183		Mailing Address 870 NW 87 AVE MIAMI, FL 33172	
2. Principal Place of Business - No P.O. Box # 5201 Blue Lagoon Dr Floor #8		3. Mailing Address 5201 Blue Lagoon Dr Floor #8	
Suite, Apt. #, etc. 5201 Blue Lagoon Dr Floor #8		Suite, Apt. #, etc. 5201 Blue Lagoon Dr Floor #8	
City & State Miami, FL		City & State Miami, FL	
Zip 33126		Zip 33126	
Country 		Country 	
4. FEI Number 01142008		Chg-P CR2E034 (12/06)	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEREK, OLGA 6368 SW 138 PATH MIAMI, FL 33183		7. Name and Address of New Registered Agent Name Merek, Olga Street Address (P.O. Box Number is Not Acceptable) 5201 Blue Lagoon Dr Floor #8 City Miami FL Zip Code 33126	
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 Olga Merk <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEREK, OLGA 6368 SW 138 PATH MIAMI, FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- President Merek, Olga 5201 Blue Lagoon Dr Floor #8 Miami, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SUAREZ, REBECA 6368 SW 138 PATH MIAMI, FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- Vice President Suarez, Rebeca 5201 Blue Lagoon Dr Floor #8 Miami, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUDINO MONTILLA, RICARDO JESUS 6368 SW 138 PATH MIAMI, FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- Vice President Gudino Montilla, Ricardo Jesus 5201 Blue Lagoon Dr Floor #8 Miami, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MENDEZ, SELENA 6368 SW 138 PATH MIAMI, FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- Vice President Gudino Montilla, Ricardo Jesus 5201 Blue Lagoon Dr Floor #8 Miami, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARINUZZI TINELLI, ELEANA S 6368 SW 138 PATH MIAMI, FL 33183	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- Director Marinuzzi Tinelli, Eliana S 5201 Blue Lagoon Dr Floor #8 Miami, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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.			
SIGNATURE: Olga Merk <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 01/14/08 <small>Date Daytime Phone #</small>	