

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119693

Entity Name: WORLD VIEW TELEVISION INC.

FILED  
Mar 16, 2009  
Secretary of State

## Current Principal Place of Business:

6392 NORTHWEST 84TH AVENUE  
MIAMI, FL 33166

## New Principal Place of Business:

6392 NW 84 AVE  
MIAMI, FL 33166

## Current Mailing Address:

6392 NORTHWEST 84TH AVENUE  
MIAMI, FL 33166

## New Mailing Address:

6392 NW 84 AVE  
MIAMI, FL 33166

FEI Number: 22-3972168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

VELASQUEZ, STEPHANIE  
6392 NW 84 AVE  
MIAMI, FL 33166 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: STEPHANIE VELASQUEZ

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: VELASQUEZ, JORGE  
Address: 6392 NORTHWEST 84TH AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: VPD ( ) Delete  
Name: VELASQUEZ, BEATRIZ  
Address: 6392 NORTHWEST 84TH AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete  
Name: VELASQUEZ, STEPHANIE  
Address: 6392 NORTHWEST 84TH AVENUE  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: VELASQUEZ, JORGE  
Address: 6392 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

Title: VPD (X) Change ( ) Addition  
Name: VELASQUEZ, BEATRIZ  
Address: 6392 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

Title: SD (X) Change ( ) Addition  
Name: VELASQUEZ, STEPHANIE  
Address: 6392 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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: JORGE VELASQUEZ

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03/16/2009

Electronic Signature of Signing Officer or Director

Date