

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000008412

FILED
Mar 30, 2009
Secretary of State

Entity Name: WORLD CLASS SOLUTIONS INC.

Current Principal Place of Business:

2135 NW 79 AVE.
MIAMI, FL 33122

New Principal Place of Business:

2500 NW 25 AVE
UNIT 253
MIAMI, FL 33122

Current Mailing Address:

2135 NW 79 AVE.
MIAMI, FL 33122

New Mailing Address:

2500 NW 25 AVE
UNIT 253
MIAMI, FL 33122

FEI Number: 74-3249035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRESPO, JORGELINA
2135 NW 79 AVE.
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

MARSAGLIA, JORGELINA
2500 NW 25 AVE
UNIT 253
MIAMI, FL 33122 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: JORGELINA MARSAGLIA

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRESPO, JORGELINA
Address: 20292 SW 85 AVE
City-St-Zip: MIAMI, FL 33189

Title: V (X) Delete
Name: GIUSSANI, ALICIA
Address: 20292 SW 85 AVE
City-St-Zip: MIAMI, FL 33189

Title: GM (X) Delete
Name: MARSAGLIA, GERMAN M
Address: 2135 NW 79 AVE
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARSAGLIA, JORGELINA
Address: 20292 SW 85 AVE
City-St-Zip: MIAMI, FL 33189

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JORGELINA MARSAGLIA

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date