2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P21046

1. Entity Name

U.S.-WORLDWIDE FINANCIAL SERVICES, INC.



FILED Mar 02, 2006 08:00 Al **Secretary of State**

Principal Place of Business

425 AUSTIN AVENUE

STE 1902 WACO, TX 76701 Mailing Address

425 AUSTIN AVENUE

STE 1902

WACO, TX 76701



DO NOT WRITE IN THIS SPACE

02252006

No Chg-P

CR2E034 (11/05)

4. FEI Number 74-2449829

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, ROWENA 2637 SENECA DR. JACKSONVILLE, FL 32259

DO NOT WRITE IN THIS SPACE

02/20/2006

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			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.		cing \$5.00 May Be	ewordstein einstein Lind Egibert Stein oder in der Stein der
10. OFFICERS AN	ND DIRECTORS		
TITLE PTD NAME NALL, KENNETH H. STREET ADDRESS 425 AUSTIN AVE. STE. 1902 CITY-ST-ZIP WACO, TX 76701			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			##7####4\$2965 #97#3/66-80##-#19 15#.0#
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TMLE NAME STREET ADDRESS CITY-ST-ZIP			
12. Thereby certify that the information supplied with this filing does not qualify for the examptions contained in Chapter 119. Florida Statutes. Liurther 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. Liurther 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. Liurther 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. Liurther certify that the information indicated on this report of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporation of the corporation or the receiver of the corporation of			

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR