

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90014 032 ***150.00

DOCUMENT # P93000039306

1. Entity Name

WORLDWIDE CONSULTANTS, INC.

Principal Place of Business

**150 EAST PALMETTO PARK RD
SUITE 210
BOCA RATON FL 33432
US**

Mailing Address

**150 EAST PALMETTO PARK RD
SUITE 210
BOCA RATON FL 33432
US**

2. Principal Place of Business

1700 Spanish River Rd.

Suite, Apt. #, etc.

Boca Raton, FL

City & State

3. Mailing Address

1700 Spanish River Rd.

Suite, Apt. #, etc.

Boca Raton, FL

City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number

74-2737555

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**EMAS, MARSHALL J ESQ.
100 NE THIRD AVENUE
STE. 1100
FORT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **FIVESON, GLORIA**
STREET ADDRESS **150 EAST PALMETTO PARK RD, SUITE 210**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1700 Spanish River Rd.**
CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE ☐ Change ☐ Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/01

Date

561-394-8076

Daytime Phone #

CR2E034 (10/00)