

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000050781

1. Entity Name
WORLDWIDE PROPERTIES OF AMERICA, INC.



Principal Place of Business
809 LONGBOAT CLUB ROAD
LONGBOAT KEY, FL 34228 US

Mailing Address
809 LONGBOAT CLUB ROAD
LONGBOAT KEY, FL 34228 US



01292007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0424646

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, CHARLES R
4442 GARCIA AVE
SARASOTA, FL 34233

**DO NOT WRITE
IN THIS SPACE**

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JACOBS, KLAUS J
STREET ADDRESS SEEFELDQUAI 17
CITY-ST-ZIP CH-8034 ZU SWITZERLAND,

TITLE VPD
NAME JACOBS, RENATA
STREET ADDRESS SEEFELDQUAI 17
CITY-ST-ZIP CH-8034 ZU SWITZERLAND,

TITLE S
NAME MARTIN, CHARLES R JR
STREET ADDRESS 4442 GARCIA AVE.
CITY-ST-ZIP SARASOTA, FL 34233

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles R Martin, Jr. ✓ 2/12/07
Secretary

Date

Daytime Phone #

✓ 813-695-2231