FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 15 AM 10:23

DOCUMENT # P94000024057 (9)

1. Corporation Name
WORLDWIDE CONNECTION SERVICE, INC.

Principal Place of Business	Mailing Address
7523 ALOMA AVE. SUITE 110 WINTER PARK FL 32792	7523 ALOMA AVE. SUITE 110 WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/28/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 593309227 ☐ Applied For ☐ Not Applicable
21 6925 WILLIAMS DR	26 6925 WILLIAMS DR	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
City & State 23 TAMPA, FL	City & State 28 TAMPA, FL	6. Election Campaign Financing Trust Fund Contribution ☒ $5.00 May Be Added to Fees
Zip 24 33634 Country 25 USA	Zip 29 33634 Country 30 USA	8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST. TALLAHASSEE FL 32301	81 Name: MICHAEL J. NOLAN 82 Street Address (P.O. Box Number is Not Acceptable): 6925 WILLIAMS DRIVE 83 84 City: TAMPA FL 85 Zip Code: 33634

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] CEO — DATE: 31 MAY 1995
(Signature of the person named as registered agent and the date of acceptance) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		11 TITLE	DIRECTOR/PRESIDENT ☐ Change ☑ Addition
NAME		12 NAME	A. YASSIN SALEM 32751
STREET ADDRESS		13 STREET ADDRESS	125 W. Lake Faith DR MAITland, FL
CITY ST ZIP		14 CITY ST ZIP	
TITLE		21 TITLE	CEO ☑ Addition
NAME		22 NAME	Michael J. Nolan
STREET ADDRESS		23 STREET ADDRESS	6925 Williams Drive
CITY ST ZIP		24 CITY ST ZIP	Tampa, FL 33634
TITLE		31 TITLE	DIRECTOR ☐ Change ☑ Addition
NAME		32 NAME	JEFF A. DELICIO
STREET ADDRESS		33 STREET ADDRESS	P.O. BOX 8088
CITY ST ZIP		34 CITY ST ZIP	CAMP LEJEUNE, N.C. 28547-8088
TITLE		41 TITLE	DIRECTOR ☐ Change ☑ Addition
NAME		42 NAME	AISHA SALEM
STREET ADDRESS		43 STREET ADDRESS	125 W. LAKE FAITH DR
CITY ST ZIP		44 CITY ST ZIP	MAITLAND, FL 32751
TITLE		51 TITLE	DIRECTOR/TREASURER ☐ Change ☑ Addition
NAME		52 NAME	KATHLEEN O'MALLEY
STREET ADDRESS		53 STREET ADDRESS	7216 So. CHRISTIANA ST
CITY ST ZIP		54 CITY ST ZIP	CHICAGO, ILL. 34606
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 above, if applicable, with an address.

SIGNATURE: [signature] 4/21/95 407-598-0850
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040001 CP