2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

Jul 20, 2005 08:00 AM DOCUMENT # P94000029745 **Secretary of State** 1. Entity Name BBC WORLDWIDE, INC. Principal Place of Business Mailing Address 5150 COUNTRYSIDE COURT 5150 COUNTRYSIDE COURT ST. CLOUD, FL 34771 ST. CLOUD, FL 34771 07172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3232923 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARTCZAK, ROBERT DO NOT WRITE 5150 COUNTRYSIDE COURT ST, CLOUD, FL 34771 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 Fiorida. 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the П Due by September 7, 2005 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. PO TITLE NAME BARTCZAK, ROBERT STREET ADDRESS 5150 COUNTRYSIDE COURT ST. CLOUD, FL 34771 CITY-ST-ZIP U000000373800 TITLE 07/20/05-80008-017 isn.m NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if

FILED