2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
07 MAR 19 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000062689

1. Entity Name
WORLD ACCESS U.S.A. CORP.

Principal Place of Business	Mailing Address
3004 NW 82 AVENUE MIAMI, FL 33122	3004 NW 82 AVENUE MIAMI, FL 33122

03122007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8212 NW 30th TERRACE	8212 NW 30th TERRACE
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33122 Country:	Zip: 33122 Country:

4. FEI Number: 65-0510889 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CAETANO, MARIA 3004 NW 82 AVE. MIAMI, FL 33122	Name: SAMUELS, HARRY M Street Address (P.O. Box Number is Not Acceptable): 2901 STIRLING ROAD-SUITE 307 City: FT LAUDERDALE FL Zip Code: 33312

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: Harry M Samuels 3/9/07
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when changing) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CAETANO, MARIA I 3143 ARBOR LANE HOLLYWOOD, FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P/	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT COSTA, SARA J 3004 NW 82 AVE. MIAMI, FL 33122	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	3143 ARBOR LANE HOLLYWOOD, FL 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	000085885750 04/05/07--01030--024 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE: (R) 3/9/07 (305) 593-8010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #