

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000058520**

1. Entity Name

WORLDWIDE RESOURCE MANAGEMENT, INC.**FILED****Feb 07, 2000 8:00 am
Secretary of State**

02-07-2000 90018 001 ***150.00

Principal Place of Business

Mailing Address

2151 LEJEUNE ROAD
SUITE 312
CORAL GABLES FL 331342151 LEJEUNE ROAD
SUITE 312
CORAL GABLES FL 33134

2. Principal Place of Business

3. Mailing Address

8950 N. Kendall Drive**8950 N. Kendall Drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

403

#403

City & State

City & State

Miami, FL**Miami, FL**

Zip

Zip

33176

Country

Country

USA**USA**

4. FEI Number

65-0679446

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

**MONZON, ANTONIO
2151 LEJEUNE ROAD
SUITE 312
CORAL GABLES FL 33134**

Name

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

8950 N. Kendall Drive

403

City

Miami**FL**

Zip Code

33176

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 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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
☐ Delete	PD MONZON, ANTONIO 2151 LEJEUNE ROAD, SUITE 312 CORAL GABLES FL 33134	☒ Change ☐ Addition	8950 N. Kendall Drive, # 403 Miami, FL 33176
☐ Delete	VSD IPARRAGUIRRE, JOSE 2151 LEJEUNE ROAD, SUITE 312 CORAL GABLES FL 33134	☐ Change ☐ Addition	8950 N. Kendall Drive, # 403 Miami, FL 33176
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	

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 Title or Printed Name of Signing Officer or Director

Date

Daytime Phone #