

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065435

FILED
Feb 22, 2009
Secretary of State

Entity Name: LB WORLDWIDE HOLDINGS, INC.

Current Principal Place of Business:

11700 NW 102ND RD
STE 15
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 527805
MIAMI, FL 33152 US

New Mailing Address:

11700 NW 102ND RD
STE 15
MIAMI, FL 33178

FEI Number: 65-0688812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOWENTHAL, PAUL
Address: 11700 NW 102ND RD STE 15
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: BRODIE, DAVID
Address: 11700 NW 102ND AVE- STE 15
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL LOWENTHAL

D

02/22/2009

Electronic Signature of Signing Officer or Director

_____ Date