

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2001 8:00 am
Secretary of State

05-30-2001 90036 028 ***150.00

DOCUMENT # P96000096328

1. Entity Name

WorldSource International, Inc.

Principal Place of Business

Mailing Address

4354 Juniper Terrace
 Boynton Beach, FL 33436

Same

C0070623

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0709559

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Feigenbaum, David
 200 Knuth Rd # 220
 Boynton Beach, FL 33436

Name

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

City

FL

Zip Code

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, typed or printed name 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!

After MAY 1, 2001

FEE IS \$150.00

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

TITLE	President	<input type="checkbox"/> Delete
NAME	Dennis Robert Morien	
STREET ADDRESS	4354 Juniper Terrace	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE	Vice-President	<input checked="" type="checkbox"/> Delete
NAME	Michael Lopes	
STREET ADDRESS	2130 Broadway suite 2311	
CITY-ST-ZIP	NY, NY 10023	
TITLE	Secretary	<input checked="" type="checkbox"/> Delete
NAME	Michael Lopes	
STREET ADDRESS	2130 Broadway suite 2311	
CITY-ST-ZIP	NY, NY 10023	
TITLE	Treasurer	<input checked="" type="checkbox"/> Delete
NAME	Kevin Bird	
STREET ADDRESS	Lyon House 27 High Street	
CITY-ST-ZIP	Thames Ditton Surrey KT7050	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dennis Morien	
STREET ADDRESS	4354 Juniper Terrace	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dennis Morien	
STREET ADDRESS	4354 Juniper Terrace	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dennis Morien	
STREET ADDRESS	4354 Juniper Terrace	
CITY-ST-ZIP	Boynton Beach, FL 33436	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report; 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:

Dennis R Morien

Dennis R Morien

5-16-2001

954-725-7045

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)