

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000066413

FILED
Jul 03, 2007
Secretary of State

Entity Name: WORLDWIDE VISA & PASSPORT SERVICES, INC.

Current Principal Place of Business:

2701 S LEJEUNE RD
SUITE 414
CORAL GABLES, FL 33134

New Principal Place of Business:

2655 S. LEJEUNE RD
SUITE 1004
CORAL GABLES, FL 33134

Current Mailing Address:

2701 S LEJEUNE RD
SUITE 414
CORAL GABLES, FL 33134

New Mailing Address:

2655 S. LEJEUNE RD
SUITE 1004
CORAL GABLES, FL 33134

FEI Number: 65-0774361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHEA, TIMOTHY F
Address: 2701 LEJEUNE RD., STE. 414
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TIMOTHY F. SHEA

DP

07/03/2007

Electronic Signature of Signing Officer or Director

Date