## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 20, 2005 08:00 AM Secretary of State

2-21 411	IVER ITEM VITE	
DOCUMENT # P9800 1. Entity Name WORLD EXPORT WORKS, II		
Principal Place of Business 811 MERIDIAN LANE HOLLYWOOD, FL 33019	Mailing Address 811 MERIDIAN LANE HOLLYWOOD, FL 33019	



DO	NOT	WRITE	IN	THIS	SPACE	4. FEI Number 65-0846587

CR2E034 (10/03)

01102005

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

コタレークロケーショフトレ

Daytme Phone #

Name and Address of Current Registered Agent	]
	Ï
GORFINKEL, NESTOR B	İ
1111 KANE CONCOURSE #401	

BAY HARBOR ISLANDS, FL 33154

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

No Chg-P

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 Signature, typed or printed name of registered agent and trille if approximate. (NOTE, Registered Agent signature required which is instating)  DATE							
	Organization, types or present that he or register or digests and the	topswade. (1015) regionates	Contraction	redesed whom to make a gr			
	E NOW!!! FEE IS \$150.00 by 1, 2005 Fee will be \$550.00	<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>	ng	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			(1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DICKSTEIN, JUDY 811 MERIDIAN LANE HOLLYWOOD, FL 33019			.,	U00000187359 01/24/05-80003-025 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS DICKSTEIN, GABE 811 MERIDIAN LANE HOLLYWOOD, FL 33019		•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP			·	IN *	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				"			
TITLE NAME STREET AODRESS CITY-ST-ZIP			<u></u>				
12. I hereby of indicated of the corporated changed.	certify that the information supplied with this it on this report or supplemental report is true a poration or the receiver or trustee approwere or on an attachment with an aggress, with all	ling does not qualify for the exemy and accurate and that my signatur to execute this report as required to ther like empowered.	otion state e shall ha d by Chap	d in Section 119.07(3)( ve the same legal effecter 607, Florida Statute	(i), Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if		