## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P98000084617

1. Entity Name

ANDREA WORLD CORPORATION



FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90372 033 \*\*\*150.00

8021 CANTERBURY CIRCLE 8021		Mailing Address 8021 CANTERBURY CIRCLE LARGO FL 34647		- Ji		
Principal Place of Business     3. N		3. Mailing Address	<del></del>	-{	[  #1# # \$11#	
Suite, Apt. #, etc. Su		Suite, Apt. #, etc.	·	☐ CHECK HERE IF MAKING CHANGES		
City & State Cit		City & State	··· <u> </u>	4. FEI Number 59-3251247	Applied For Not Applicable	
Zip	Country	Zip	Country		8.75 Additional see Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Ag	ent	
	NIE ENWARD A		Name	Name		
	DUE, EDWARD C		Street Address	O. Box Number is Not Acceptable)		
1202 NEBRASKA AVENUE PALM HARBOR FL 34683						
PALM MA	INDUN FL 34683					
			City	FL	Zip Code	
		r the purpose of changing its re	gistered office or registe	red agent, or both, in the State of Florida. I am far	niliar with, and accept	
the obligat	tions of registered agent.				}	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Agent signature requires	d when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 11	
TITLE	D	☐ Delete	TITLE	[	Change Addition	
NAME	PAPADIMITRIOU, PAMELA A 8021 CANTERBURY CIRCLE		NAME		{	
STREET ADDRESS CITY-ST-ZIP	LARGO FL 34647		STREET ADDRESS CITY-ST-ZIP			
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			NAME			

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-03 727-391

Daytime Phone #

32F034 (10/02