

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000106119

1. Entity Name

WORLD DISCOUNT COMMUNICATIONS, INC.

FILED

May 11, 2000 8:00 am  
Secretary of State

05-11-2000 90327 032 \*\*\*150.00

Principal Place of Business

10400 GRIFFIN ROAD  
SUITE 301  
COOPER CITY FL 33328  
US

Mailing Address

10400 GRIFFIN ROAD  
SUITE 301  
COOPER CITY FL 33431-8504  
US

2. Principal Place of Business

2000 GLADES ROAD

3. Mailing Address

2000 GLADES ROAD

Suite, Apt. #, etc.

SUITE 312

Suite, Apt. #, etc.

SUITE 312

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

Zip

33431

Country

US

Zip

33431

Country

US.

6. Name and Address of Current Registered Agent

CASTRO, MAGDIEL

16232 EMERALD COVE ROAD  
WESTON FL 33331

7. Name and Address of New Registered Agent

Name

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

3214 NW 181 STREET

City

MIAMI

FL

Zip Code

33050

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!!! FEE IS \$150.00**  
**After MAY 1, 2000 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	CASTRO, MAGOLEL	16232 EMERALD COVE ROAD	WESTON FL 33331	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	CASTRO, MAGDIEL	3214 NW 181 STREET	MIAMI, FL 33050	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28-00 (954) 401-0558

CR2E034 (9/99)