## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051863

Entity Name: GANDELL WORLD ENTERPRISES INC.

**FILED** Feb 10, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8860 CYPRESS HAMMOCK DRIVE 4406 N. MELTON AVENUE

TAMPA, FL 33614 TAMPA, FL 33614

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 271384 TAMPA, FL 33688

FEI Number: 59-3580233 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GANDELL, MARIA D DR GANDELL, MARIA D DR. 8860 CYPRESS HAMMOCK DR. 4406 N. MELTON AVENUE TAMPA, FL 33688 TAMPA, FL 33688

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: 02/10/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

GANDELL, MARIA D DR. Name: 4406 N. MELTON AVENUE Address: City-St-Zip: TAMPA, FL 33614

Title:

Name: GANDELL, MARIA D 4406 N. MELTON AVENUE Address: TAMPA, FL 33614 City-St-Zip:

Title:

GANDELL, MARIA D Name: 4406 N. MELTON AVENUE Address: City-St-Zip: TAMPA, FL 33614

Title:

GANDELL, MARIA D Name: Address: 4406 N. MELTON AVENUE

City-St-Zip: TAMPA, FL 33614

Title:

GANDELL, MARIA D Name: Address: 4406 N. MELTON AVENUE City-St-Zip: TAMPA, FL 33614

Title:

Name: GANDELL, MARIA D 4406 N. MELTON AVENUE Address: City-St-Zip: TAMPA, FL 33614

I hereby 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 all other like empowered.

Ρ SIGNATURE: DR. MARIA D. GANDELL 02/10/2011