

1.) CORPORATION NAME:

WORLDWIDE CLINICAL TRIALS HOLDINGS, INC.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1887985**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 NORTH MAPLE DRIVE

CITY/ST/ZIP: BEVERLY HILLS, CA 90210

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	NEAL R. CUTLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	401 N. MAPLE DRIVE		
CITY/ST/ZIP/CO:	BEVERLY HILLS, CA 90210		
NAME:	MICHAEL R. DENVIR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASSIST SEC		
ADDRESS:	401 N. MAPLE DRIVE		
CITY/ST/ZIP/CO:	BEVERLY_HILLS, CA 90210		
NAME:	THOMAS S. WARDLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO/VP		
ADDRESS:	401 N. MAPLE DRIVE		
CITY/ST/ZIP/CO:	BEVERLY HILLS, CA 90210		
NAME:	DAVID M. BUTLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN/SEC		
ADDRESS:	401 N. MAPLE DRIVE		
CITY/ST/ZIP/CO:	BEVERLY HILLS, CA 90210		
NAME:	EVERETT TRUITT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	401 N. MAPLE DRIVE		
CITY/ST/ZIP/CO:	BEVERLY HILLS, CA 90210		
NAME:	Joseph C Linnen	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 N. Maple Dr		
CITY/ST/ZIP/CO:	Beverly Hills, CA 90210		

NAME: Angelico Carta TITLE: ASST SECRETARY ADDRESS: 401 N. Maple Dr. CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Thomas H Quinn TITLE: DIRECTOR ADDRESS: 401 N. Maple Dr CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John W Jordan II TITLE: DIRECTOR ADDRESS: 401 N. Maple Dr. CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Samuel C Simmons TITLE: SR VP Finance ADDRESS: 401 N. Maple Dr. CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Donald L Oros TITLE: ASST TREASURER ADDRESS: 401 N. Maple Dr. CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Steven L Rist TITLE: ASST SECRETARY ADDRESS: 401 N. Maple Dr. CITY/ST/ZIP/CO: Beverly Hills, CA 90210	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ Samuel CSimmons SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Samuel CSimmons, PRINTED NAME AND CORPORATE TITLE	2/26/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		