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Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 388539 (9)

1. Corporation Name
WORLDCHECK, INC.



Principal Place of Business
~~W JACK + KETAY~~ 1/2 JACK STONE
STE 410, 12955 BISCAYNE BLVD.
NORTH MIAMI FL 33181

Mailing Address
W JACK + KETAY Jack Stone
STE 410, 12955 BISCAYNE BLVD.
NORTH MIAMI FL 33181-2085

3. Date Incorporated or Qualified 09/17/1971	3a. Date of Last Report 06/21/1996
4. FEI Number 59-1366527	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent
KETAY, JACK I
STE 410, 12955 BISCAYNE BLVD
N MIAMI FL 33181

10. Name and Address of New Registered Agent
81 Name MICHAEL S. DAVIS, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable)
2311 N. ANDREWS AVENUE
83
84 City Wilton Manors FL 85 Zip Code 33311

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: MICHAEL S. DAVIS, ESQ. DATE: 2/4/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KETAY, JACK	1.2 NAME	MICHAEL S. DAVIS
STREET ADDRESS	3400 NORTHEAST 170TH ST	1.3 STREET ADDRESS	1200 NW 101 WAY
CITY, ST, ZIP	N MIAMI BCH, FL 00000	1.4 CITY - ST - ZIP	Plantation FL 33322
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME	STONE, JACK	2.2 NAME	
STREET ADDRESS	20350 W COUNTRY CLUB DR	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL 00000	2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY - ST - ZIP	

14. I (we) 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 annual report or supplemental annual 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 a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: MICHAEL S. DAVIS President 2/4/97 954-566-9919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)