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Jan 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 758161 (4)

1. Corporation Name

FLORIDA WORLD ORGANIZATION OF CHINA PAINTERS', I NC.



Principal Place of Business

Mailing Address

4851 GANDY BLVD.E
B10L26. REGENCY COVE
TAMPA FL 33611-3023
US

4851 GANDY BLVD.E
B10L26. REGENCY COVE
TAMPA FL 33611-3039
US

3. Date Incorporated or Qualified
10/26/1981

3a. Date of Last Report
04/03/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-2222279

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution



\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIELBY, IRIS N
B10 L26, REGENCY COVE
4851 GANDY BLVD.
TAMPA FL 33611

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT DELETE
NAME WILLIAMSON, CAROLENE
STREET ADDRESS 3830 SW PORTULACA CT
CITY-ST-ZIP DUNNELLON FL 34431-3909

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VPT DELETE
NAME HIGGINS, JUDY
STREET ADDRESS 3812 CARDENAL AVE.
CITY-ST-ZIP RUSKIN FL 33573-6735

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VPT DELETE
NAME WAARDENBURG, DENICE V
STREET ADDRESS 706 SPRING VALLEY DR.
CITY-ST-ZIP MELBOURNE FL 32940-1718

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S DELETE
NAME PICKETT, LINDA
STREET ADDRESS 2804 ANNISTON RD.
CITY-ST-ZIP JACKSONVILLE FL 32246-3436

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TD DELETE
NAME MATTHEWS, CAROL ANN
STREET ADDRESS 7204 SEASHORE DR.
CITY-ST-ZIP PORT RICHEY FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Iris N. Bielby, Pres. 1-7-97 (813)831-6232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0047862

CR2E037 (9/96)