FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H15932

(7)

Principal Place	o Name ORLD, INC.	Mailing Address					
100 S.E. 2ND ST. SUITE 4250 MIAMI FL 33131		100 S.E. 2ND ST. Suite 4250 Miami Fl 33131-2148		.:			
US		US			3. Date Incorporated or Qualified 08/10/1984	3a. Date of Last Report 08/14/1996	l
2. Principal 8	ace of Business	2a. Mailing Address 26			4. FEt Number 59-2433986	Applied Not App	
Suite, Apt	#, etc	Suite. Apt. #, etc		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additi	ional
City & State	£:	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee	Be
Zip	Country	26 Zip	Count	гу	8. This corporation has liability for	intangible tax under s. 199.	
24	25 25 9. Name and Address of Current	Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
SAA	TI, GINA	negisterou Agent	8	1 Name	10. Hallie and Address of New In	Alstored Adelli	
	S.E. 2ND ST.		<u> </u>		(5.0)		
SUM	TE 4250		8:		dress (P.O. Box Number is Not Accepta)ie)	
MIAI	MI FL 33131		8	3			
			8	4 City		FL 85 Zip Code)
agent I a SIGNATURE 12.	en Tamil ar with, and accept the obligation to the state of the state	hons of, Section 607.0505, Flo	orida Statute	es.	ation's board of directors. I hereby acceured when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	4 e
HILE	PT	DELETE	1 1 TITLE			☐ Change ☐	Addition
HAME	SAATI, ANTOINE 100 S.E. 2ND ST., SUITE 4250		1.2 NAME				
STREET ADORESS	MIAMI FL.			ET ADDRESS			
CITY-ST-70P TITLE		XX DELETE	1.4 CITY 2 1 TITLE			Change	Addition
NAME	DEEB, EDDY		2.2 NAME	:			
STREET ADDRESS	100 S.E. 2ND ST., SUITE 4250		23 STRE	ET ADDRESS			
CITY-ST ZIP	MIAMI FL Ap		2 4 CiTY				4.000
TITLE NAME	SAATI, GINA	DELETE	3 1 TITLE 3 2 NAMI			- Li Change	Addition
STREET ADDRESS	100 S.E. 2ND ST., SUITE 4250		i i	ET ADDRESS			
C(TY - S1 - 71P	MIAMI FL		3.4 CITY				
TITLE	VS	DELETE	4.1 TITLE			Change	Addition
NAM:	SAATI, GEORGES		4. 2 NAM	E			
STREET ADDRESS	100 S.E. 2ND ST., SUITE 4250 MIAMI FL			ET ADDRESS			
City - S" - ZiP Title	MICHAEL L.	DELETE	4.4 CITY - 5.1 TITLE			☐ Change ☐	Addition
NAME			5.2 NAMI			□ onenge □	i riogilion
STREET ACORESS				ET ADDRESS			
CRY+ST-ZIP			5.4 CITY	1			
THLE		☐ DELETE	6.1 TITLE			☐ Change ☐	Addition
NAME			6.2 NAM	E			
STREET ADORESS			ı	et address			
Olly-SI-7F	hy certify that the information complice	with this filling does not qualit	64 CITY		ed in Section 119.07(3)(i), Florida Statuti	as I further certify that the	
informatic	on indicated on this annual report or su	upplemental annual report is t	rue and acc	curate and tha	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as if made under o	oath; that

SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/97

(305)577-8889

FILED

Jan 23 1997 8:00am

Secretary of State