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

TITLE

NAME

STREET ADDRESS

SIGNATURE:

Block 12 or Block 13 if changed, or on an attach

City-St-Zip

FILED PROFIT Jan 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** H15932 (7) ONE WORLD, INC. Principal Place of Business Mailing Address 100 S.E. 2ND ST. 100 S.E. 2ND ST. **SUITE 4250** SUITE 4250 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 U\$ 3. Date Incorporated or Qualified 08/10/1984 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2433986 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. X Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SAATI, GINA 100 S.E. 2ND ST. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 4250** 83 MIAMI FL 33131 Zip Code 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 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 DELETE. Change 1.1 TITLE TITLE SAATI, ANTOINE 1.2 NAME NAME STREET ADDRESS 100 S.E. 2ND ST., SUITE 4250 1.3 STREET ADDRESS MIAMI FL CITY - ST-ZIF 1.4 CITY-ST-ZIP DELETE Change Addition TITLE AP 2.1 TITLE SAATI, GINA 2.2 NAME NAME 100 S.E. 2ND ST., SUITE 4250 STREET ADDRESS 2.3 STREET ADDRESS Miami FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE SAATI, GEORGES 3.2 NAME NAME 100 S.E. 2ND ST., SUITE 4250 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition

6.1 TITLE

6.2 NAME

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 employered 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.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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