FILED Apr 17, 2003 8:00 am

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H72651 1. Entity Name BUSINESS WORLD, INC.					Secretary of State 04-17-2003 90206 013 ***150.00			
Principal Place of Business 1323 SE 17TH ST FT. LAUDERDALE FL 33316		Mailing Address 1323 SE 17TH ST FT. LAUDERDALE FL 33316						
2. Principal P	lace of Business	3. Mailing Address			- I TORRADI BIRLI KABIYA KIRAD ALIDIK DIKARA YADI DIDILI BABRI SANJI BABRI DIDIL BURKA INDI.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State	e	City & State			4. FEI Number 59-257222	 25	\rightarrow	oplied For ot Applicable
Zip Country		Zip	p Country		5. Certificate of Status Desired		.75 Add	litional
	6. Name and Address of Current	Registered Agent			7. Name and Address of New	Registered Age	nt	
DI ACI/E	LAWBENCE E ECO			Name				
BLACKE, LAWRENCE E ESQ. 3326 N.E. 33RD STREET				Street Address	(P.O. Box Number is Not Acceptab	ole)		
ft. Laud	ERDALE FL 33308					*		
				City		FL	Zip Code	э
	named entity submits this statement follows of registered agent.	r the purpose of chan	iging its register	ed office or registe	red agent, or both, in the State of F	Florida. I am famil	iar with, a	and accept
SIGNATURE .	Signature, typed or printed name of registered agent		Alots P	d Agent signature require		DATE	_	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department o	f State			9. Election Campaign F Trust Fund Contribut			O May Be to Fees
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND DIF	RECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BINDLER, FRANCI 1323 S.E. 17TH ST. FT. LAUDERDALE FL 33316	☐ Dele	NAM Stre	!			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dete	NAM Stre				Change	☐ Addition
TITLE NAME STREET ADDRESS C(TY-ST-ZIP		Dele	NAM Stre				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Dele	NAMI STRE				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dele	NAM! STRE	1			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with	☐ Dele	NAMI STREI CITY-	E ET ADDRESS ST-ZIP	AVA 110 07/0V) 51-14-0		Change	Addition

In nereby certify that fine information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachmentwith an address, with all other like empowered.

GNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Date

SIGNATURE: