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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J73732

(6)

WORLD ISLAND BUILDERS, INC.

		FILEL	)
Apr	15	1998	8:00am
Se	cre	tary o	f State

Principal Place	n of Business	, Ada	iling Address			<del></del>					
Principal Place of Business Mailing Address  5 WILLARD DRIVE P.O. BOX 3926 SUITE 646 ST AUGUSTINE FL 32085 ST. AUGUSTINE BEACH FL 32086						DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualified				
2 Principal P	Place of Business	20	Mailing Address				05/20/1987 4. FEI Number	_	T 14c	oplied For	
21	lade of Basiness	26	Walling / tooloos				59-2811150		<del></del>	ot Applicable	
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.	·				<b>\$</b>	<del></del>	Additional	
22		27					5. Certificate of Status Desired		Fee Re	guired	
City & Stat	е		City & State				6. Election Campaign Financing		55.00	May Be	
23	Counts	28	7	1 00	<b>.</b>				Added t		
Zip	Country		Zip	Count	try		8. This corporation owes or has paid	-	-	angible DNo	
24	25   g. Name and Address of Cur	29 rent Regist	ered Agent	30			Personal Property Tax due June 30			7 140	
MA	RSHALL, ROBERT			6	31	Name	10.				
	B MARSH PT CIRCLE				32	Street Addr	ress (P.O. Box Number is Not Acceptable				
	AUGUSTINE BEACH FL 320	84		ľ	•	Street Addit	ress (F.O. Box Number is Not Acceptable,	,			
]				8	33						
i				8	14	City		В	Zin (	Code	
		. <del> </del>						FL			
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the St im familiar with, and accept the ot	ate of Florida	a. Such change was	authorized	bγ	the corporati	poration submits this statement for the pur tion's board of directors. I hereby accept t	pose of cha the appointr	nging it: nent as	s registered registered	
SIGNATURE											
12.	Signature, typed or printed name of my-stored OFFICERS	agent and title if AND DIREC		TE Registered A	<b>∖</b> gen	at signature require	red when reinstating)  ADDITIONS/CHANGES TO OFFICEF	DATE DO AND DIE	ECTOB	S IN 12	
TITLE	PSD	THE DITE.	DELETE	1.1 TITLE	 E		ADDITIONS/CHANGES TO OFFICER		Change	Addition	
NAME	MARSHALL, ROBERT			1,2 NAM	IE						
STREET ADDRESS	318 MARSH PT CIR			1.3 \$186	EE1 /	ADDRESS					
CITY-ST-ZIP	ST. AUGUSTINE BCH FL 3	2084		1.4 CITY	-ST	ſ-ZIP		_			
TITLE			☐ DELETE	2.1 TITL	E				Change	Addition	
NAME				2.2 NAM	E						
STREET ADDRESS				2.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP			DELETE	2. 4 City		T-ZIP			0	T a gange	
TITLE			☐ DELETE	3.1 TITLE					Change	L.] Addition	
NAME Street address				3.2 NAM		ADDRESS					
CITY-ST-ZIP				3.4. CITY							
TITLE			☐ DELET <b>E</b>	4.1 TITLE		1-211			Change	Addition	
NAME				4, 2 NAN					•		
STREET ADDRESS				4.3 STRE	ET A	ADDRESS .					
CITY-ST-ZIP				4.4 CITY	-ST	Γ- <b>Z</b> (P	<u> </u>				
TITLE			DELETE	5.1 TITLE	E				Change	Addition	
NAME				5.2 NAM	E						
STREET ADDRESS				5.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP	——————————————————————————————————————		Briefe	5.4 CITY		- ZIP			<u> </u>	T1 4 4444.	
TITLE			☐ DELETE	6.1 TITLE				L	Change	☐ Addition	
NAME OTDECT ADDRESS				6.2 NAM		*DODECC					
STREET ADDRESS						ADDRESS					
14. I hereby c	certify that the information supplied	d with this file	ng does not qualify	6.4 CITY for the exem	ilar	ion stated in :	Section 119.07(3)(i), Florida Statutes. I fur	ther certify	that the	information	
indicated officer or	on this annual report or suppleme	ental annual i eceiver or tri	report is true and ac ustee empowered to	curate and t	that	ıt mv sianatur	re shall have the same legal effect as if muired by Chapter 607, Florida Statutes; and	ade under d d that my na	oath; tha ame app	at I am an pears in	
CICALAT	TIBE, V IX (NX)	1 Test 1	はしてんさくへん	$\sim$ 24 $n_{\wedge}$			14/10/98 904	421	613	/	