

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**APPROVED
AND
FILED**

95 JUN 22 AM 8:59

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000080783 (2)**

1. Corporation Name
JERIS WORLDWIDE INC.

Mailing Address
**C/O FRANK J. SEGREDO ESQ.
3191 CORAL WAY, SUITE 510
MIAMI FL 33145**

Principal Place of Business
**C/O FRANK J. SEGREDO ESQ.
3191 CORAL WAY, SUITE 510
MIAMI FL 33145**

If above addresses are incorrect in any way, line through incorrect information and enter correction below

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001522438
-06/23/95--01089--018
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/23/1993	3a. Date of Last Report
4. FEI Number 65-0451025	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required	6. Electon Campaign Financing Trust Fund Contribution <input type="checkbox"/>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Mailing Address	2a. Principal Place of Business
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
23 City & State	27 City & State
24 Zip Country	28 Zip Country
25	29
30	

9. Name and Address of Current Registered Agent

**SEGREDO FRANK J
3191 CORAL WAY
SUITE 510
MIAMI FL 33145**

10. Name and Address of New Registered Agent

81 Name **GERMAN FRAYND**
 82 Street Address (P.O. Box Number is Not Acceptable) **1380 MIAMI GARDENS DRIVE #210**
 83
 84 City **N. Miami Beach** FL 85 Zip Code **33179**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or 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 607.0505 or 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* **G. FRAYND PRESIDENT** DATE: **4/15/95**

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D	1.1 TITLE	
1.2 NAME	FRAYND GERMAN MD	1.2 NAME	
1.3 STREET ADDRESS	1380 MIAMI GARDENS DR, SUITE 210	1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	N. MIAMI BEACH FL 33179	1.4 CITY, ST, ZIP	
2.1 TITLE		2.1 TITLE	
2.2 NAME		2.2 NAME	
2.3 STREET ADDRESS		2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP		2.4 CITY, ST, ZIP	
3.1 TITLE		3.1 TITLE	
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP		3.4 CITY, ST, ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP		4.4 CITY, ST, ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP		5.4 CITY, ST, ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	T.S. 6/22/95	6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 607 or 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: *[Signature]* **G. FRAYND PRESIDENT** DATE: **5/18/95** **305 940064**