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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000045726 (3)

WORLD'S PRODUCTION INC.

**FILED** Apr 22 1997 8:00am Secretary of State

Principal Place of Business 1150 S. DIXIE HWY, SUITE 211 CORAL GABLES FL 33146 US		Mailing Address 1550 S. DIXIE HWY. SUITE 211 CORAL GABLES FL 33146-3034 US					
				3. Date Incorporated or Qualified 06/07/1995	3a. Date of 05/01/1	Last Report 996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For
21	26				65-0642178		Not Applicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 Additional Fee Required
City & State	28	City & State			Election Campaign Financing     Trust Fund Contribution		5.00 May Be Added to Fees
Ζιρ <b>25</b>	Country 29	Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RICARDO PONS			81	Name			
6934 SW 114 PL. UNIT D. MAIMI FL 33173			82	Street Addre	ess (P.O. Box Number is Not Acceptated SW 80 STREET	AP. 2	216
<b>W 2 2 2 2</b>			83				
			84	City M/	ані	FL 65	Zip Code 33193
office or registered agent,	of Sections 607,0502 and 6 or both, in the State of Floring accept the obligations of	da. Such change was auth	norized b	y the corporation	oration submits this statement for the poor's board of directors. I hereby accept	urpose of char at the appointm	nging its registered nent as registered

SIGNATURE thire typica or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE PONS , ROBERTO . 6934 SW 114 PL, UNIT D TOVAR, ALBERTO 1.2 NAME NAME AVE 9 #21 SECTOR CARABOBO 1.3 STREET ADDRESS STREET ACIDRESS MIAHI, FL 33173 ESTADO ZULIA, VENEZUELA 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change ☐ Addition TITLE PONS. RICARDO 2 2 NAME NAME 6934 SW 114 PL, UNIT D. STREET ADDRESS 2.3 STREET ADDRESS MIMAI FL 2. 4 CITY-ST-ZIP CITY - \$1 - 20F DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREE: ADDRESS 3.4. CITY-ST-ZIP OITY-ST-7/P DELETE Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAVE 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHTY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE DILE 62 NAME NAME STHEET ADDRESS **63 STREET ADDRESS** 0:1Y-\$1-7P 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 coloration of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Lam an officer or director of the cappears in Block 12 or Block 13 on an attachment with an address

SIGNATURE:

(305) 661 - 75 7*5*<sup>-</sup>