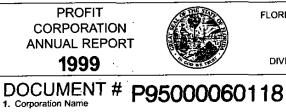
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

WORLDWIDE DYNAMICS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90088 045 ***150.00



	•							
Principal Place of Business Mailing Address							- I POULLOUR 110 (BIBL BITH BONK ENST BEAU BONK BUILD BITH BONK HOOD HOUR HOUR HOUR	
4927 CLOCK RD. 4927 CLOCK RD.								
LAKE WORTH FL 33463 LAKE WORTH FL 33463							DO NOT WRITE IN THIS SPACE	
And the state of t							3. Date Incorporated or Qualifed	
							08/03/1995	
2. Principal Pl	ace of Business	2a. Ma	iling Address	-			4. FEI Number Applied For	
21		26					65-0600337 Not Applicable	
Suite, Apt.	#, etc.	<u> </u>	te, Apt. #, etc.		ı		5. Certificate of Status Desired \$8.75 Additional Fee Required	
22		27 Cit	y & State					
City & State	8 	28	y a state شعنان م				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country		Zip Country				8. This corporation owes the current year Intangible	
24	25	29		30			Personal Property Tax. ☐ Yes ☐ No	
	9. Name and Address of Curre	nt Registere	d Agent				10. Name and Address of New Registered Agent	
					81	Name	•	
Fields, Joseph R Jr.,esq 515 N Flagler Drive, STE 1450					82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
·			•					
WEST PALM BEACH FL 33401					83			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					84	City	. 85 Zip Code	
44 Dispuses to the provisions of Sections 607 0502 and 607 1508 Florida Statute					Ш		FL T	
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 ag	ent and title if appl	icable. (NOTE	: Registered	Agen	t signature required	red when reinstating) DATE	
12.	OFFICERS A	ND DIRECTO	ORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST: DELETE		1.1 TI	1.1 TITLE		Change Addition		
NAME	1 0.1.200.1.200, 1.1.1.1.1		1.2 NA		ME	1		
STREET ADDRESS						ADDRESS	•	
CITY-ST-ZIP	11001 17 ton DO 1011 1 00 to 1		_	TY-81	r-ZIP	☐ Change ☐ Addition		
TITLE			☐ DELETE	2.1 TI			C Grange	
NAME				22 N				
STREET ADDRESS						T ADDRESS		
CITY-ST-ZIP	rame to the design and the first terminal	 	DELETE		ITY-S	1-ZIP	Change — Addition	
NAME				3.2 N				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP	•					T-ZIP	•	
TITLE			☐ DELETE	4.1 TI			☐ Change ☐ Addition	
NAME				4.2 N	AME			
\$TREET ADDRESS				4.3 S	TREET	TADORESS		
CITY-ST-ZIP				4.4 C	TY-S	T-ZIP		
TITLE			☐ DELETE	5.1 TI			☐ Change ☐ Addition	
NAME				5.2 N				
STREET ADDRESS	•				-	ADDRESS		
CITY-ST-ZIP					TY-S	T-ZIP		
TITLE			☐ DÉLETE	6.1 TI			Change Addition	
NAME	1			6.2 N	NME			

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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 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 12 or Block 13 if changed, or on an attachment with an address/with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS