FILE NOW: FILING FEE AFTER MÁY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000067457 (8)							
	REAL WORL	LD INTERNATIONAL,	INC.		 		
Principal Place of Business Mailing Address							
853 VANDERBILT BEACH RD., STE. 333 853 VANDERBILT BEAC NAPLES FL 33963 NAPLES FL 33963							
					3. Date incorporated or Qualified 08/31/1995	3e. Date of Last Report	
	2. Principal Place of Business 28. M 21 4100 Belair Lane. 26				4. FEI Number	Applied For	
	+100 10000 uite, Apt. #, etc.	r hanc	26		65-0614120	Not Applicable	
22	# 105		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	Naples	FL	City & State	•	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Z		Country	Zip	Country		Added to Fees	
24	33940	25 USA	29	30	8. This corporation has liability for Florida Statutes	Intangible tax under s. 199.032,	
	9. Na	ame and Address of Curre	nt Registered Agent		10. Name and Address of New F		
KIZIS, THOMAS G 853 VANDERBILT BEACH RD., STE. 333 NAPLES FL 33963				82 Street 41 83	'homas G. Kizis Address (P.O. Box Number is Not Acceptat 00 Bulair Lanu 105	,	
SIGN	ATHER.	or both, in the State of Floric coept the obligations of, Soct ped or printed name of registered agent OFFICERS ANI	and title if applicable.	NOTE: Registered Agent signature of 13.		DATE	
TITLE	D		DELETE	1. 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition	
NAME		s, thomas g		1.2 NAMÉ	Thomas 6. Kizis	ign onlings [[] reduitor	
STREET	853 VANDERBILT BEACH R		D., STE. 333	1.3 STREET ADDRESS	4100 Bulair Lane, #105		
CITY-S	T-ZIP NAP	LES FL 33963		1.4 CITY-ST-ZIP	Naples FL 33940	ļ	
TITLE			DELETE	2 1 TITLE	T/s'	Change Addition	
NAME	ADDRESS			2.2 NAME	Olga A. Rodriguez		
CHTY-\$1	1			2.3 STREET ADDRESS	Olga A. Rodriquez 4100 Bulair Lark #105		
TITLE	1-61		□ DELETE	2.4 CHY-ST-ZIP 3.1 TITLE	Naples FL 33940	Cheese Clade	
NAME				3 2 NAME		Change Addition	
STREET	ADORESS			3.3. STREET ADDRESS			
CITY-ST	I - ZIP			3.4 CITY - S1 - ZIP			
TITLE			☐ DELE1E	4.1 TITCE		Change Addition	
NAME				4.2 NAME			
STREET				4.3 STREET ADDRESS		,	
CITY-ST TITLE	- ZIP		F3 bolere	4.4 CITY-ST-ZIP			
NAME	1		DELETE	5. 1 TITLE		Change Addition	
STREET A	ADDRESS ADDRESS			5.2 NAME		j	
CITY-ST				5 3 STREET ADDRESS			
TITLE			DELETE	5.4 City-St-7IP 6. 1 Title		Change Cl Addition	
NAME		i	C.,u	6.2 NAME		Change Addition	
STREET A	ADORESS			6.3 STREET ADDRESS			
CITY-ST-				6.4 CITY-ST-ZIP		ł	
14 I A	to hereby port	at the information arms at an in-	241 44 2 522				

ial the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further nation 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 ifficer 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 or Block 13.ff.cbanged, or on an attractment with an address. certify that the in oath; that I am a

SIGNATUR

mmas Gille SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 (941) 261-8881

CR2E034 (12/95)