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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600040983 1. Corporation Name

WORLDWIDE MOVIES, INC.

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90243 002 ***150.00

WONED	WOL WOTES! WO					
Principal Place	e of Business	Mailing Address				
1040 ABADA C	OURT NE #111	1040 ABADA COURT NE #	#11 †			
PALM BAY FL	COURT NE #111 . 32905 Place of Business . #, etc.	PALM BAY FL 32905				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						05/07/1996
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-3378430 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5 Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		Zip Country				Trust Fund Contribution Added to Fees
Zip	Country	Zip	30	unuy		8. This corporation owes the current year intangible Personal Property Tax.
24	9. Name and Address of Current	29 Legistered Agent	30	Т		10. Name and Address of New Registered Agent
5. Haille alto Address of Culteria Registered Agent				81	Name	
JAC	obs, kenneth n	L		82	Ctroot Add	dress (P.O. Box Number is Not Acceptable)
1423	SOUTH PATRICK DRIVE			02	Stieet Add	diess (F.O. Box Number is Not Acceptable)
SATI	ELLITE BEACH FL 32937			83		
l				84	City	85 Zip Code
				1	7	P_L
office or r agent. I a	to the provisions of Sections 607,0002 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a	authorize	ed by	the corporat	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTI	E: Registere	nd Ager	nt signature requi	ared when reinstating) DATE
12.	OFFICERS AN		13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	STOCKTON, KELLEY		1.2 NAME		ļ	
STREET ADDRESS	1040 ABADA CT NE #111				T ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32905	☐ DELETE		CITY-S	T-ZIP	Change Addition
TITLE	D	T DETELE		ITLE	-	Solution Walter
NAME	NUCKOLS, JEFF			NAME		,
STREET ADDRESS	221 CHALET AVE				TADDRESS	
CITY_ST_ZIP	-INDIALANTIC-FL-32903	☐ DELETE		CITY-S TITLE	ST-ZIP-	☐ Change ☐ Addition
TITLE	D FIFT DO LIEDDEDT			VAME	=	rields, Herbert
NAME	Fields, Herbert 2223 Palm PL DR		9		TADDRESS 1	Change Addition is elected, Herbert Place Apt#511 Rockville, MD 20852
STREET ADDRESS	PALM BAY FL 32905		3.4. CITY-		T. 710	ROCKVIILE, MD 20852
CITY-ST-ZIP TITLE	FALM DAT FL 32903	☐ DELETE		MLE	51-2IF F	☐ Change ☐ Addition
NAME		_	4.2	NAME		
STREET ADDRESS					TADDRESS	
CITY-ST-ZIP				CITY-S	ĺ	
TITLE		☐ DELETE		TITLE		Change Addition
NAME			5.2	VAME		•
STREET ADDRESS			5.3 8	STREET	T ADDRESS	
CITY-ST-ZIP			5.4 (CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1	TITLE		☐ Change ☐ Addition
NAME			6.21	NAME		
STREET ANDRESS			6.3	STREE	TADDRESS	

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.

6.4 CITY-ST-ZIP

407-724-0850