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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000084819 (6)

C.C.N. WORLD CORPORATION

14. I hereby certify that the information supplied with this filing indicated on this annual report or supplymental annual report of supplymental annual report of the corporation of the sectiver or higher Block 12 or Block 13 if changes, or on an altabance, with

Principal Place	e of Business	Mailing Address	Mailing Address			
16561 LAKE T		ū	16561 LAKE TREE DRIVE			
FT LAUDERDA			FT LAUDERDALE FL 33326			
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
		n milnær i Nærke of Williams				10/01/1997 4. FEI Number Applied For
⊢ ¬	ace of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied by Not Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				SQ 75 Additional
22		[27]				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🔲 No
	g, Name and Address of Curre	nt Registered Agent		ļ.,	1	10. Name and Address of New Registered Agent
	ramson, edward j esq.			81	Name	;
	0 N.W. 12TH STREET Te 580		82 5		Street /	t Address (P.O. Box Number is Not Acceptable)
	MI FL 33126		Ē			
				84	City	85 Zip Code
		1005 4100 FL 1	<u> </u>	Щ		FL
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, it am familiar with, and accept the ohligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature typed or planted harve of regressed agent and their applicable. (NOIL Registered Agent signature required when rehistating) DATE						
12.		ID DIRECTORS	13.	o Agr	- Calgirata I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	DELET		TLE		Change Addition
NAME	SANSEVIERO-TIERNO, NICOI	.A	1.2 N	AME		
STREET ADDRESS	16561 LAKE TREE DRIVE		1.3 \$	1REE 1	ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33326		1.4 C	IIY-S	ST-ZIE	
TITLE		☐ DELET	E 2.1 T	ITLE		☐ Change ☐ Addition
NAME			2.2 N	AME		
STREET ADDRESS			2.3 S	TREEI	ADDRESS	
CITY-ST-ZiP				HTY-5	S1 - ZIP	
TITLE		∐ DELFT	E 3.1 T	TLE		Change Addition
NAME			3.2 N	AMŁ		
STREET ADDRESS			3.3 S	1REE T	ADDRESS	
CITY-ST-ZIP					ST-ZIP	Chara Littlian
TITLE		Ļ.] D€LET				Change
NAME			4.21			
STREET ADDRESS					ADDRESS	
CiTY-ST-ZIP		DELET			31 - ZIP	Change Addition
TITLE			5.2 N			
NAME					ADDITION	
STREET ADDRESS					ADDRESS	
City-S1-ZiP		DELET			ST - 7IP	Change Addition
TITLE NAME		_ 7000	62 N			
1 1					ADDRESS	
STREET ADDRESS					ADUNESS SI-ZIP	
14. I hereby o	ertify that the information supplied v	vith this filing days not ou	ality for the av	omn	tion elate	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated	on this annual report or suppl e ment	al annual recountlis true ait	Naccurate an	id thi	at my sig	ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in

11.1.00