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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P96000052358 (4)

WORLD-TRANS INTERNATIONAL, INC.

Principal Place of Business Mailing Address 6960 NW 66TH ST 6960 NW 65TH ST PARKLAND FL 33067-1400 PARKLAND FL 33067 3. Date Incorporated or Qualified 3a. Date of Last Report 06/18/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0692005 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199,032, Fiorida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 FABRIKANT, SUSAN 6960 NW 66TH ST 82 Street Address (P.O. Box Number is Not Acceptable) PARKLAND FL 33067 83 Zip Code 85 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: Type if or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) (96/6)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE P/S/D X Change Addition TOTLE FABRIKANT, ALBERTÓ 1.2 NAME NAME FABRIKANT, ALBERTO 6960 NW 66TH ST STREET ADDRESS 1.3 STREET ADDRESS 6960 NW 66 ST PARKLAND FL 33067 CHY-ST-ZIP 1.4 CITY-ST-ZIP Parkland FL 33067 Change Addition TITLE DELETE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - 7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-\$1-7iP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZU

SIGNATURE: Alberto Fabrikant, Pres

14. I do hereby certily that the information supplied with this filing does not qualify for the exemption

information indicated on this annual report or supplemental annual report is true and accur I am an officer or director of the corporation or the receiver or trustee empowered to execuappears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

01/12/97 Date

stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

hat my signature shall have the same legal effect as if made under oath; that port as required by Chapter 607, Florida Statutes; and that my name

954592-0873

**2E034** 

Daytime Phone #

**FILED** 

Feb 03 1997 8:00am

Secretary of State