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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000091918 (8)

WORLD WIDE GOLD AND COIN EXCHANGE, INC.

FILED Mar 19 1997 8:00am Secretary of State



Dringland Diag	e of Duringe	Mailes Adds	Anilyna Address									
Principal Plac			Mailing Address									
21346 ST ANDREW BLVD STE 147 BOCA RATON FL 33433			21346 ST ANDREW BLVD STE 147 BOCA RATON FL 33433-2432									
						3.	. Date Incorp	orated or Qualific	ed 3a. D.	ate of Last	Report	
	Place of Business	├ı	2a. Mailing Address				, FEI Number	101006	10	— t-	Applied For	
21		26					65-0710848 Not Applica					
Sulte, Apt. #, etc.		27 Suile, Apt.	Suite, Apt. #, etc.			5.	5. Certificate of Status Desired					
City & Stat	e		City & State				6. Election Campaign Financing \$5.00 May Be					
23		28	28			"	Trust Fund Contribution Added to Fees					
Zip	Country Zip Co			ountry	untry 8. This corporation has liability for intangible tax under s. 19					s. 199.032,		
24	25	29	30				Florida Statu			□ No		
	g, Name and Address of Curre		t			-	Name and	Address of New	Registered	Agent		
	H PERFORMANCE INVESTMEN			B1	Name	e					l	
21346 ST ANDREW BLVD STE 147					Stree	Street Address (P.O. Box Number is Not Acceptable)						
BO	CA RATON FL 33433											
				83								
				84	City		***************************************		FL	85 Zij	o Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the obli	502 and 607.1508, Flo to of Florida. Such ch galions of, Section 60	orida Statutes, the ange was authori 07.0505, Florida S	abovi zed by tatute:	e-name the co s.	d corporation supportation supported to the component of the corporation of the corporati	on submits thi board of direc	s statement for the stors. I hereby ac	ne purpose o	f changing pointment a	its registered as registered	
SIGNATURE	Signature, typod or printed name of registered a	oved each title of produced de	(NOI) Itea si	ered Ane	tencia tur	ire required whe	o reinstating)		DATE			
12.		ND DIRECTORS	1 1:					CHANGES TO OF		DIRECTO	ORS IN 12	
TITLE	PD			TITLE		T	1,13,51,13,13		7.00.10	Change		
NAME	DIBUCCI, THOMAS		1:	NAME						•		
STREET ADDRESS	21346 ST ANDREW BLVD ST	TE 147	147			;						
CITY-ST-ZIP	BOCA RATON FL 33433			CITY-S								
TITLE				TITLE						Change	Addition	
NAME			2:	NAME								
STREET ADDRESS			2:	STREET	ADDRESS	; [
CITY-ST-ZIP			2	4 CHY-5	S1 - ZIP							
TITLE			DELETE 3	THE						Change	Addition	
NAME			3:	NAME								
STREET ADDRESS			3.:	STREE1	ADDRESS	: [
CITY-ST-ZIP			3.4	CITY	ST-ZIP							
TITLE			DELETE 4.º	TOLE		1				Change	Addition	
NAME			4.	2 NAME								
STREET ADDRESS			4.3	STREET	ADDRESS	;						
CITY-ST-ZIP				CITY-S	T - 71P							
TITLE			DELETE 5.1	TITLE						Change	Addition	
NAME			5.3	NAME							ļ	
STREET ADDRESS			5.3	STREET	ADORESS	: [
CITY-ST-ZIP			5.4	CITY-S	T-ZIP							
TITLE				TITLE		1				Change	Addition	
NAME			62	NAME							j	
STREET ADDRESS			63	STREET	ADDRESS	: [
CITY-ST-ZIP		-7		CITY-S							ļ	
						-L				·		

4. I do hereby certify that the information supplied with this filling 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 of displance 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 displance empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in claying d, or on an attaching d with an address.

MONATURE: 189 (2)

3/4/97