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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000020995 (3)

APPLIA	NCE WORLD, INC.			I PRANTEN NE NAME BURY BROW BROW BROW BROW BROW	18 2 0110 10110 10110 1010 1010 1001
Principal Place	e of Business	Mailing Address			ii ddiid ihiik ididi diii ibbi
3355 LAKE W	orth Rd.	3355 LAKE WORTH RD.			
UNIT 4 LAKE WORTH FL 33461		UNIT 4 LAKE WORTH FL 33461		DO NOT WRITE IN THIS	SPACE
LAKE WORTH	FL 33401	LAKE WORTH PL 33401		3. Date Incorporated or Qualified	
				03/15/1995	
2. Principal Pr	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0568475	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	, <u> </u>	Trust Fund Contribution	Added to Fees
Zip	Country	7(p)	Country	8. This corporation owes or has paid the cu	
24	25		30	.1	☐ Yes 1241-No
	9, Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered	Agent
HO	RTON, THOMAS		81 Name		
	5 LAKE WORTH ROAD		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	TE 4				
LAH	(EWORTH FL 33461		83		
			84 City	PI	85 Zip Code
				FL	<u> </u>
office or ri	egistered agent, or both, in the State	of Florida. Such change was a	uthorized by the corporation	oration submits this statement for the purpose only board of directors. I hereby accept the app	of changing its registered pointment as registered
agent. La	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	rida Statutes.		
SIGNATURE.					
12.	Signature: typed or printed name of regularied ago OFFICERS AN		Registered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD	DELETE	1.1 THTLE	ADDITIONS/CHANGES TO OFFICE IS AN	Change Addition
NAME	HORTON, THOMAS	<u></u> 5.6072	1.2 NAME		
STREET ADDRESS	3355 LAKE WORTH ROAD #4	4	1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	7	1.4 City-St-ZiP		
TITLÉ	V	DECETE	2.1 THILE		Change Addition
NAME	GRAY, KYLE L		2.2 NAME		<u> </u>
STREET ADDRESS	3355 LAKEWORTH RD #4		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKEWORTH FL		2.4 CITY - ST - ZIP		
TITLE	DARESTOTITE	DELETE	3.1 TITLE	······	☐ Change ☐ Addition
NAME		-	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-S1-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-SI-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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.

FILED

Apr 14 1998 8:00am

Secretary of State