## 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 # **S45146**

1. Corporation Name

TRANSWORLD HOLDINGS, INC.

Principal Place of Business
MED ODENOLE AVENUE

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90096 041 \*\*\*150.00



Principal Place of Business Mailing Address							
2150 BRENGLE AVENUE 2150 BRENGLE AVENUE							
ORLANDO FL 32808-5630 ORLANDO FL 32808-5630					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		$\overline{}$
					04/15/1991		
2 Principal Pl	ace of Business	2a. Mailing Address		<del></del>	4. FEI Number		pplied For
<b>-</b> '	ace of business	— ·			59-3064830	J	lot Applicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite Apt # etc		_ : : : : : : : : : : : : : : : : : : :		Additional
<b>–</b>		— · · · ·	27		5. Certificate of Status Desired Fee Required		
22   .   27					6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution		to Fees
Zip	Country		Zip Country		8. This corporation owes the current year Inta	angible	
24	25	29 30	-		Personal Property Tax.	Yes	□No
24	9. Name and Address of Curre				10. Name and Address of New Registered A	Agent	
			81	Name			
DEVI	ERALL, ROBERT M.		-	Charat Adda	rese (D.O. Rey Number is Not Acceptable)		
2150 BRENGLE AVENUE			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		-
ORLANDO FL			83				
						1	
			84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes, th	e abov	e-named corp	oration submits this statement for the purpose of	changing it	ts registered
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was author ations of, Section 607.0505, Florida S	ized by Statutes	the corporation	on's board of directors. I hereby accept the appoin	uneni as i	egisiered
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						ļ
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Regis	tered Age	nt signature require			
12.	OFFICERS A		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	e ☐ Addition
NAME	OROPEZA, FRANK C.	I .	1.2 NAME				İ
STREET ADDRESS	2150 BRENGLE AVENUE		1.3 STREE	TADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-S	T-ZIP			
TITLE	D	☐ DELETE :	2.1 TITLE			☐ Change	Addition
NAME	oropeza, anne s.	]:	2.2 NAME	Ì			)
STREET ADDRESS	2150 BRENGLE AVENUE	:	2.3 STREE	T ADDRESS			1
CITY-ST-ZIP	ORLANDO FL	:	2. 4 CITY-5	ST-ZIP			
TITLE	D .	☐ DELETE	3.1 TITLE			Change	Addition
NAME	OROPEZA, FRANK W.		3.2 NAME				-
STREET ADDRESS	2150 BRENGLE AVENUE		3.3 STREE	TADORESS			ļ
CITY-ST-ZIP	ORLANDO FL		34 CITY-S	ST-ZIP			
TITLE	VD	☐ DELETE	1.1 TITLE		<del></del>	Change	e ☐ Addition
NAME	DEVERALL, ROBERT M.		4. 2 NAME				
STREET ADDRESS	2150 BRENGLE AVENUE		4.3 STREE	TADDRESS			
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-S	T-ZIP			
TITLE			5.1 TITLE			Change	Addition
NAME			5.2 NAME				J
STREET ADDRESS		!	5.3 STREE	TADDRESS			1
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			ľ
CITY+ST-ZIP		1	6.4 CITY-S	T-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.

SIGNATURE: