

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

FILED

Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 249385 (6)
1. Corporation Name
TROPHY WORLD, INC.

Principal Place of Business Mailing Address
6400 N.W. 77TH COURT 6400 N.W. 77TH COURT
MIAMI FL 33166 MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/17/1961	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-0935238		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	25 Country	28 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SEDANO, MANUEL J 11200 N.W. 60TH CT HIALEAH FL 33012		10. Name and Address of New Registered Agent 81 Name C. ROBERT MURRAY, JR 82 Street Address (P.O. Box Number is Not Acceptable) 83 8300 N.W. 53 ST. SUITE 300 84 City MIAMI FL 85 Zip Code 33166	
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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 *C. Robert Murray, Jr.* 2/6/98
Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPAS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEDANO, MANUEL J	1.2 NAME	
STREET ADDRESS	11200 NW 60TH CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH, FL 00000	1.4 CITY-ST-ZIP	
TITLE	PTD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAAS-RUSSIYAN, CYNTHIA	2.2 NAME	
STREET ADDRESS	BOX 394, DEER TRAIL	2.3 STREET ADDRESS	
CITY-ST-ZIP	SUGAR LOAF NY 10981	2.4 CITY-ST-ZIP	
TITLE	EVP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSIYAN, NICHOLAS	3.2 NAME	
STREET ADDRESS	BOX 394, DEER TRAIL	3.3 STREET ADDRESS	
CITY-ST-ZIP	SUGAR LOAF NY	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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.

SIGNATURE: *CYNTHIA WAAS RUSSIAN* 2/16/98 305-582-5851

CR2E034 (10/97)