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

DOCUMENT #

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1. Corporation Name WORLD GREEN, INC. Principal Place of Business 6225 POWERS AVE JACKSONVILLE FL 32217 Mailing Address 6226 POWERS AVE JACKSONVILLE FL 32217-2215											
<u>:</u>								3. Date Incorporated or Qualified 10/15/1965		ate of Last Ro 5/01/1996	
2. Principal Place of Business 2a. Mailing Address		ailing Address				4. FEI Numbor		Ap	plied For		
21 Suite An	Suite, Apt. #, etc.			Suite, Apt. #, etc.			59-1166612	Not Applicable			
22	n. #, etc.		27			5. Certificate of Status Desired		Fee Required			
City & St	ate			y & State				6. Election Campaign Financing		\$5.00	
23			28					Trust Fund Contribution		Added t	
Zip	 1	ountry	Zış)	Countr	У		8. This corporation has liability for			199.032,
24	25 25	Adress of Comme	29	of Amont	30]				Yos		
	WSBACHER, LEW	Address of Curre	n negistere	u Agent	B1	П	Name	10. Name and Address of New R	តមិនេសេព	Agent	
	1215 SOUTHPOIN										
	IACKSONVILLE FL				82	2	Street Addre	ress (P.O. Box Number is Not Acceptable)			
_					83	3					
					84		City				
					64	•	City		FL	85 Zip C	2006
SIGNATURE	Signature, typed or printe		on! and tile if ap	plicable (NO	PIL Registered Ag	gent	signature require	d when reinstaling) ADDITIONS/CHANGES TO OFF	DATE CERS ANI		
TITLE	PD ROSENBAUN	4 HEDDOID			1.1 717LE					Change	Addition
NAME STREET ARCOES	ACCE DOUGE				1.2 NAME		DC-DE OD				
STREET ADDRESS	JACKSONVI				1.3 STREE						
CITY-ST-ZIP TITLE	80		· · · · · · · · · · · · · · · · · · ·	DELETE	2 10LE	51.	ZIP			Change	Addition
NAME	HILL, CURTIS	\$			2 2 NAME						
STREET ADDRESS		e green dr n			2,3 S1REE		DORESS				
CITY-ST-ZIP	JACKSONVIL	LE FL			2. 4 CITY -	- 51-	- ZIP				
TITLE	VD			BELETE	3.1 T(1) E					Change	Addition
NAME	ROSENBAUK				3.2 NAME		ļ				
STREET ADDRESS	s 6225 POWEI		N .		3.3 STREE	T AS	DORESS				
CITY-ST-ZIP	MICHOUNTE	TE LF	vec	eased	3.4. CITY-	- \$1 -	· ZIP			T 0	T 1
TATLE				L DELETE	4.1 TITLE					∐ Change	☐ Addition
NAME execut apoptor					4. 2 NAME		DOBLCC				
STREET ADDRESS	° [4.3 STREE 4.4 C(1)Y-1						
CITY-ST-ZIP TITLE	- 		·······	DELÉ TE	5.1 TITLE		211			Change	Addition
NAME					5.2 NAME						
STREET ADDRESS	s				53 STREE		DDRESS				
CITY-ST-ZIP					5.4 C/TY-	ST-	ZIP				
TITLE				DELETE	6.1 THLE					Change	Add/tion
NAME	1				6.2 NAME						
STREET ADDRESS	s				6.3 STREE	1 A(DDRESS				
CITY-ST-ZIP	i				6.4 CITY	S1-	ZIP				

14. I do 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 logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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 30 1997 8:00am

Secretary of State