

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

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90050 008 ***158.75

DOCUMENT # 565979

1. Corporation Name

WORLD TRADEBANK LTD. CORPORATION



Principal Place of Business

Mailing Address

8190 SW 78 STREET
SUITE 100
MIAMI FL 33143
US

P.O. BOX 430065
MIAMI FL 33243-0065
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/06/1978

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

T. ASKARI
8190 SW 78 STREET
SUITE 100
MIAMI FL 33143

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

14. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PMD
NAME ASKARI, MICHAEL
STREET ADDRESS 8190 SW 78 STREET
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE C
NAME AL-SAUD, HRH PRINCE M.
STREET ADDRESS 8190 S.W. 78 ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VD
NAME ABDEL-AZIZ, TAREK
STREET ADDRESS 8190 S.W. 78TH ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE STD
NAME AL-KHATIB, FAISAL
STREET ADDRESS 8190 S.W. 78 ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VD
NAME ALGHANIM, ABDULLAH
STREET ADDRESS 8190 S.W. 78 ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VD
NAME SALMAN, NAEL
STREET ADDRESS 8190 S.W. 78 ST.
CITY-ST-ZIP MIAMI FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (11/98)