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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherinė Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCU 1. Corporation	MEN! # F71493				
MODER	N WORLD FINANCE CORPO	RATION		1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	Millie Dieri didii ginif diali 1907
Principal Plac	ce of Business	· Mailing Address		T (TO THE THE THE TOTAL THE PERSON THE TOTAL	Bibii bibii bibii bibii bibii bibii 1601
33 NW 2ND S	TREET	P. O. BOX 1195			* e
DEERFIELD BCH FL 33441 DEERFIELD BCH FL 33443			-	DO NOT WIDITE IN THIS	0.00405
US	• • • •	US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	3 SPACE
			•	03/17/1982	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26		26		59-2191596	Not Applicable
Suite, Apt. #, etc.			•	5. Certificate of Status Desired	\$8.75 Additional
22 27			•		Fee Required
City & Sta	te , , , , , , , , , , , , , , , , , , ,	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23	0	Zip Zip	0	Trust Fund Contribution	Added to Fees
Žip	Country 25		Country 30	8. This corporation owes the current year In	itingible XYes □No
24	9. Name and Address of Current		301	Personal Property Tax. 10. Name and Address of New Registered	
 	9. Name and Address of Current	Kedisteren Warit	81 Name	10. Name and Address of New Registered	Ageil
THO	DMAS A. ROEGIERS	and the second			·
	N FEDERAL HWY	74 (4) N	Address (P.O. Box Number is Not Acceptable)	•	
DEERFIELD BCH, FL			83	supplied to the engineering statement of the	\$1.50 \$ 30.500 \$1000 \$12.000 \$12.000
33441			••	一一一一一片的心思数。最后的黑暗的黑暗	提到結構的樣
		· ·	84 City	r de la companya de l	85 Zip Code
24 Dumin	the the previous of Sections 607 0503	and CO7 1509. Florido Statuto	the chara named	FL	f changing its societored
office or	registered agent, or both, in the State of	f Florida Such change was au	thorized by the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appo	intment as registered
85 agent. La	am familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statutes.	•	
SIGNATURE	Signature, typed or printed name of registered agent	and title if englicable /NOTE: F	Penistered Agent signature re	equired when reinstating) / , ** DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	多次發出	Change Additio
 NAME	J. DAVID ELLER	•	1.2 NAME	Control of the Contro	
STREET ADDRESS	201 N FEDERAL HWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BCH, FL 00000 334	141	1.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Additio
NAME	THOMAS A. ROEGIERS		22 NAME		
STREET ADDRESS	201 N FEDERAL HWY		2.3 STREET ADDRESS		• •
CITY-ST-ZIP	DEERFIELD BCH FL 33441 A		2. 4 CITY-ST-ZIP		
TITLE	V. C.	DELETE	.3.1 TITLE:		☐ Change ☐ Addition
NAME	ELLER, DANA J	——————————————————————————————————————	3.2 NAME		
STREET ADORESS	201 N FEDERAL HWY	art - Comment -	3.3 STREET ADDRESS		المنتقلية بيدة التعريس والوا
CITY-ST-ZIP	DEERFIELD BCH. FL 33441	•	3.4. CITY-ST-ZIP		
TITLE	V	☐ DELETE	4.1 TITLE		Change Addition
NAME	ELLER, DAREN J.		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	· · · · ·	•
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	No su	4.4 CITY-ST-ZIP		
TITLE	DELINIES SENSITE GOTTI	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	· ·	_	5.2 NAME	5.	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	A. Carrier		5.4 CITY-ST-ZIP		r.
TITLE	TO THE STATE OF	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	2000 CBBA,300000000000000000000000000000000000		6.2 NAME		— — — — — — — — — — — — — — — — — — —
	05071940 BD - 745.1338	41	63 STREET ADDRESS	•	

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 trie 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 employeed 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 oddress, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

01-08-99

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90011 013 ***150.00

954-426-1500