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

Mailing Address

MIAMI FL 33131

26. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

SUITE 204

26

27

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29

on an attachment with an address

520 BRICKELL KEY DRIVE

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Namo F95000003763 (8)

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

25

1201 HAYS STREET

TALLAHASSEE FL 32301

SUITE 105

WORLD TOURISM INC.

Principal Place of Business

520 BRICKELL KEY DRIVE

2. Principal Place of Business

Suite, Apt. #, etc

City & State

SUITE 204

21

22

23

24

Zip

SIGNATURE

SIGNATURE:

MIAM! FL 33131

Signature, typed or prioted outon of registered agent and litte if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME BRICKER, WILLIAM L JR 1.2 NAME STREET ADDRESS 101 PARK AVE., #35TH FLOOR 1.3 STREET ADDRESS NEW YORK NY 10178 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE Change ■ Addition CARCANO, ARTURA NAME 22 NAME STREET ADDRESS **520 BRICKELL KEY DRIVE SUITE 204** 23 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 City - St - ZiP TITLE DELETE ☐ Change 3.1 TITLE ___ Addition NAME RODRIQUEZ, JOSE 3.2 NAME STREET ADDRESS 520 BRICKELL KEY DRIVE SUITE 204 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY-ST-ZiP TITLE DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.

Country

A1 Name

82

83 64 City

30

FILED Mar 25 1998 8:00am Secretary of State DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1995 Applied For 65-0631786 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Zip Code 85 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.

305-416-6563