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Mar 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F96000005052 (3)**

1. Corporation Name

WORLD OMNI RETAIL FUNDING, INC.

Principal Place of Business

**100 NW 12TH AVE
DEERFIELD BEACH FL 33442**

Mailing Address

**100 NW 12TH AVE
DEERFIELD BEACH FL 33442**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/01/1996	
21	Suite, Apt. #, etc.	26	111 NW 12th Avenue	4. FEI Number 65-0688776	Applied For Not Applicable
22	City & State	27	City & State Deerfield Beach, FL	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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

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	T	1.1 TITLE	Director
NAME	TUCKER, ALLEN A	1.2 NAME	Colin W. Brown
STREET ADDRESS	100 NW 12TH AVENUE	1.3 STREET ADDRESS	100 NW 12th Avenue
CITY-ST-ZIP	DEERFIELD BEACH FL	1.4 CITY-ST-ZIP	Deerfield Beach, FL 33442
TITLE	D	2.1 TITLE	
NAME	MORAN, PATRICIA G	2.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	
NAME	SMITH, DARYL P	3.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	WHEELER, CHRISTOPHER	4.2 NAME	
STREET ADDRESS	2225 GLADES RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33431	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BOWER, MARK	5.2 NAME	
STREET ADDRESS	1901 MAIN ST, SUITE 1400	5.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA SC 29202	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	BROWN, COLIN W	6.2 NAME	
STREET ADDRESS	100 NW 12TH AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	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:

[Signature]

3/19/98

954-429-2010

CR2E034 (10/97)