

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 29, 2001 8:00 am**  
**Secretary of State**

08-29-2001 90013 047 \*\*\*150.00

**DOCUMENT # F98000003396**

1. Entity Name

**WORLD WIDE MART, INC.**

Principal Place of Business

**2335 TAMiami TRAIL NORTH  
303A  
NAPLES FL 34103**

Mailing Address

**2335 TAMiami TRAIL NORTH  
303A  
NAPLES FL 34103**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**75-2794491**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JACKSON, DAVID R  
785 HIGH PINES DRIVE  
NAPLES FL 34103**

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

**08-21-01**

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
After September 12, 2001 Fee will be \$750.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CPT  
JACKSON, DAVID R  
725 HIGH PINES DR  
NAPLES FL 34103** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VS  
JACKSON, ADRIANA F  
785 HIGH PINES DRIVE  
NAPLES FL 34103** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**08/21/01**  
Date

**941 643 3692**  
Daytime Phone #

CR2E034 (5/01)

WORLD WIDE MART, INC.

Attachment  
#F980000003396  
A0082703

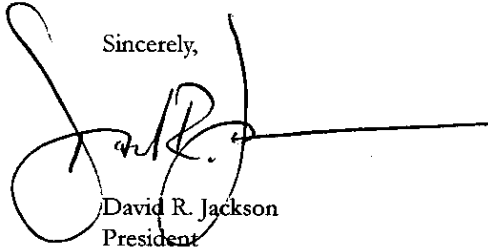
August 21, 2001

Florida Department of State  
Department of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

We did not receive the 2001 Uniform Business Report of January 1, 2001. We enclose our check for \$150.00. We called your office today to confirm that this would be satisfactory.

Sincerely,

A handwritten signature in black ink, appearing to read "David R. Jackson", with a long horizontal line extending to the right.

David R. Jackson  
President