## **FILED** 2001 UNIFORM BUSINESS REPORT (UBR) Feb 08, 2001 8:00 am Secretary of State **DOCUMENT # G50546** 1. Entity Name F.S. WORLDWIDE INVESTMENTS, INC. 02-08-2001 90063 038 \*\*\*150.00 Principal Place of Business Mailing Address % HILDE E. BAILEY % HILDE E. BAILEY 290 TUSCAWILLA ROAD 290 TUSCAWILLA ROAD C0019363 WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 Principal Place of Business Mailing Address Road COLLOY ROAD DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2314814 Florida Not Applicable Flouda Laudo \$8.75 Additional 5. Certificate of Status Desired USÁ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BAILEY, HILDE E. Box Number is Not Acceptable) 290 TUSCAWILLA ROAD WINTER SPRINGS FL 32708 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. AUL CAMP FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Director Delete TITLE TITLE paul Camp dance 5301 Coursy Road, Suite 140 Orlando, FL 32811 SCHMIDT, FRITZ NAME NAME ZIEGELGASSE 21 STREET ADDRESS STREET ADDRESS 805 FREISING, W.GER. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filling 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.

rector

YAUL CAMP LANE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: