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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H26879

(7)

GOLF AROUND THE WORLD, INC.

FILED
Jan 17 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address 1396 N. KILLILAN DR. 584 GREENWAY DR. UNIT B N. PALM BEACH FL 33408-3720 US					I LONDLOLL WHEN THOSE BINDS LAND LOND COURT DESCHI BEACH BEACH BINDS BEACH BEACH			
						3. Date Incorporated or Qualified 10/24/1984 3a. Date of Last Report 04/26/1996		
Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number		Applied For
		26				59-2463476		Not Applicab
Suite, Apt.	# etc.	Suite, Apt	t #, etc.			5. Certificate of Status Desired		5 Additional Required
City & Stat	e	City & Sta	ale		7	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip	Gountry	Zip		Country		8. This corporation has liability for in	ntangible tax und	er s. 199.032,
	25	29	30	0			Yes No	
·····	9. Name and Address of Cur	rent Registered Age	nt			10. Name and Address of New Reg	platered Agent	
	REN, GARY			81	Name			
564 GREENWAY DRIVE N. PALM BEACH FL 33408				82	Street Add	ress (P.O. Box Number is Not Acceptable	Θ)	
N. I	PALM DEACH FL 33400			83				,
				84	City		85 2	Zip Code
						poration submits this statement for the p	PL	
IGNATURE 2.	Signature expection priored hand of registered OFFICERS A	ng et and title it applicable.	(NOTE F	Registered Age	nt signature requ	ried when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECT	FORS IN 12
ſĿŧ	£ DC		DELETE	1.1 THLE			Chan	ge 🔲 Additi
ME	WIREN, GARY			1 2 NAME				
REET ADDRESS	564 GREENWAY DR.			1.3 STREET	ADDRESS			
Y-ST-ZIP	N. PALM BEACH FL			1.4 CITY - 9	T - ZIP			
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ME	WIREN, IONE S.			2.2 NAME				
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ME DESTANDANCE	SELLA GULLAS GO	Ca Canada		33 STREET	ACADDECC			
REET ADDRESS Y-ST-ZIP	5546 Golden Eag Pain Beach Barri	16 CIVER 380	10	3.4. CITY-1	1			
1-51-21F LE	THE PARTY BOLTER	ens, . C 301	DELETE	4.1 TITLE	51°44F		☐ Char	nge 🔲 Addit
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Mē				62 NAME				
REET ADDRESS				6 3 STREET	ADDRESS			
TY-ST-ZiP				64 C/TY-5	ST-ZIP			

14. I do 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:

MATCHE AND WHED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1/12/97

54/626-4176

Daytime Phone #