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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H69176

NEW WORLD HOLDINGS, INC.

Principal Place of Business		Mailing Address				HOLL RECEIP ONE DIGE	OLUŞIR BARAL BIRTLI İ	JUJU GUGU 1001
% ED VANHARASZ		% ED VANHARASZ			•	•		
4030 NW 29 ST.		4030 NW 29 ST.		DO NOT WRITE IN THIS SPACE				
MIAMI FL 33142		MIAMI FL 33142	MIAMI FL 33142		3. Date Incorporated or Qualifed			
					07/31/1985			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			59-2570887			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desir	ed 🖫	\$8.75 A	
22			27 City & State					•
City & State		⊢ '	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country	;	8. This corporation owes the	e current vear In		
24	25	·	30		Personal Property Tax.	, , , , , , , , , , , , , , , , , , ,	☐Yes	□No
	9. Name and Address of C				10. Name and Address of I	łew Registered	Agent	
			81	Name	• >			
	HARASZ, ED		82	Street Add	tress (P.O. Box Number is Not Ad	cceptable)	· · · · · · · · · · · · · · · · · · ·	.;
5445 COLLINS AVE UNIT M-15 MIAMI BEACH FL 33140							*15*1	
			83					
MINA	MI DEACH FL 33140		84	City	******	-17 	85 Zip (Code
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office or re	registered agent or both in the	7.0502 and 607.1508, Florida Statute State of Florida. Such change was au	ithorized by	the corporat	tion's board of directors. I hereby	accept the appo	intment as re	gistered
office or re	registered agent or both in the	17.0502 and 607.1508, Florida Statute State of Florida. Such change was au obligations of, Section 607.0505, Flor	ithorized by	the corporat	tion's board of directors. I hereby	accept the appo	intment as re	gistered
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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 suppliemental 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, pyon an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90040 016 ***158.75