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 # H74961

(4)

WORLD	-wide travel networi	G INC.			
Principal Plac	ce of Business	Mailing Address		T TO EIGHT BAN ABAN DIANA COUNT DINES HIT	21611 81614 81811 81811 81811 81811 1881
C/O UNDA HUGHES BOO N MAGNOLIA AVE. SUITE 101 ORLANDO FL 32803		C/O LINDA HUGHES 800 N MAGNOLIA AVE. SUITE 101 ORLANDO FL 32803-3250			On Delivida and Devel
				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal P	Place of Business	2a. Mailing Address		09/06/1985 4. FEI Number	04/02/1996 Applied For
21		26		59-2571159	Not Applicable
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.		1	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Cur	[29] [3	30]	Florida Statutes 2 10. Name and Address of New Re	Yes No
		on registered Ageni	81 Name	10. Name and Address of New No	Bistoren Wilelit
NUGHES, LINUA N.					
800 N MAGNOLIA AVE SUITE 101			82 Street Addre	ess (P.O. Box Number is Not Acceptab	ole)
	ANDO FL 32803		83		
UNL	MADO FL 32003				
			84 City		FL 85 Zip Code
11. Pursuant office or a agent. I a SIGNATURE	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ughts	s, the above-named corporation thorized by the corporation of the statutes. Hogistored Apont signature require	oration submits this statement for the pon's board of directors. I hereby access	
12.		AND DIRECTORS	Hogistoreo Agent signatura require	ADDITIONS/CHANGES TO OFFIC	DATE SERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 70 LE	7,007,070,070,070	Change Addition
NAME	HUGHES, LINDA N.		1.2 NAME		
STREET ADDRESS	1551 LAUREL ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		14 CITY - ST - ZIP		
TITLE	SD	☐ DELETE	21 TILLE		Change Addition
NAME	HUGHES, DAVID H.		2.2 NAME		•
STREET ADDRESS	1551 LAUREL ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	31 TITLE		Change Addition
NAME .	,		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		D billin	3.4. CITY - ST - ZIP		Change III Addition
TITLE		☐ DELETE ·	4.1 TillE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS		•	4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		Deter	5.2 NAME		En comingo En regultion
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TIBLE		Change Addition
NAME		-	6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		

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.

FILED

Apr 02 1997 8:00am

Secretary of State