FILE N	10W:	FILING	FEE	AFTER	MAY 1	IS	\$225.	00
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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

1996

H96494

(0)

DOCUMENT # 1. Corporation Name	H96494
WORLD WIDE MARIN	NE ELECTRONIC. INC.

WORLE) WIDE MAKINE ELECTRU	NIG, ING.					
Principal Place	of Business	Mailing Address			elor aları olakı ordar üşbil olakı oldur 1801		
% LAWRENCE H. SMITH % LAWRENCE H. SMIT 1619 BROADWAY 1619 BROADWAY RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33							
				3. Date Incorporated or Qualified 01/27/1986	3a. Date of Last Report 03/07/1995		
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number 59-2721247	Applied For Not Applicable		
Suite, Apt. #	e, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	7 _{ip}	Country 30	8. This corporation has liability for in			
	9. Name and Address of Currer			10. Name and Address of New Re	7		
			81 Name	10. Harris and Address of New At	Aistoran Water		
SMITH I	AWRENCE H.		$ S_n$	11 14 LAWRENCE	η		
	OADWAY		82 Street Add	ress (P.O. Box Number is Not Acceptable	0)		
	BEACH FL 33404		83	II DECADWAY			
14112101	557101112 50101						
			84 City	VIERA BEACH	FL 85 Zip Code 33404		
OF THE STUTE	zu agent, or botri, in the State of Fiori	da. Such chande was aufnor	tes, the above named corporation's box	ration submits this statement for the purp and of directors. I hereby accept the appo	one of all and a second of the		
familiar with	n, and accept the obligations of, Sect	ion 607.0505, Florida Stalute	S	,	3		
SIGNATURE _	Signature: typed or printed name, of registered agent	to at Massaco and the state	OTE: Bug stered Agent signature recorn	., , ,,			
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	DATE CELES AND DIDECTORS IN 15		
TITLE	D	DELETE					
NAME	SMITH, LAWRENCE H.		1 2 NAME	THOUAS LANGERT 1919 BROADWAY INIERA BEACH FL	Change 7700 (tot.		
STREET ADDRESS	961 LAUREL ROAD		1.3 STREET ADDRESS	1619 DROADWAY	_		
CiTy-S1-ZiF	N. PALM BEACH FL		1.4 CHY-ST-ZIP	INIONA BOACH FL	. 33404		
TITLE	D	☐ DELETE	2 1 TITLE		Change Addition		
NAME	SMITH, LAWRENCE M.	٥	2.2 NAME				
STREET ADDRESS	1619 BROADWAY		2.3 STREE! ADDRESS				
CITY-ST-ZIP	RIVIERA BEACH FL		2 4 CITY - ST - ZIP		•		
TITLE		DELETE	3 1 TITLE		Change Addition		
NAME			3.2 NAME		[] -1.5dg		
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIF			3.4 CITY-ST-ZIP				
TITLE		☐ DELFTE	4 1 1 ITLE		Change Addition		
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIF			4.4 CITY - ST - ZIP				
TITLE		☐ DELETE	5 I TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition		
NAME			5.2 NAME	20000191			
STREET ADDRESS			5 3 STREET ADDRESS	20000181 -05/14/96010	14031		
CITY-ST-ZIF			5 4 City - St - ZiP	***225.00	- 100° 100° A		
TITLE		☐ DēLETE	6 I TITLE		Change Addition		
NAME			6 2 NAME				
STREET ADDRESS			6 3 STREET ADDRESS				
CITY - ST - ZIP			6.4 CITY - ST - ZIP				
	certify that the information supplied	with this filma is voluntarily for		for the even ation stated in Section 110.0	7/2)/// Florido Ctotutos 1 futbor		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

5/4/96 407/844.3592