

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K20689

(1)

1. Corporation Name

WORLD WIDE BAZAAR, INC.



Principal Place of Business

Mailing Address

% MARJORIE NUSRALA  
125 HYPLUXO RD  
HYPOLUXO FL 33462

% MARJORIE NUSRALA  
125 HYPLUXO RD  
HYPOLUXO FL 33462

3. Date Incorporated or Qualified  
04/06/1988

3a. Date of Last Report  
07/28/1995

2. Principal Place of Business

2a. Mailing Address

21 3540 NORTHLAKE BLVD  
Suite, Apt. #, etc.

26 3540 NORTHLAKE BLVD  
Suite, Apt. #, etc.

4. FEI Number

65-0044689

Applied For

Not Applicable

22 City State  
Palm Beach Gardens FL

27 City State  
Palm Beach Gardens FL

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

23 Zip Country  
33403 USA

28 Zip Country  
33403 USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

24 33403 25 USA

29 33403 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NUSRALA, MARJORIE  
125 HYPOLUXO RD  
HYPOLUXO FL 33462

81 Name  
NUSRALA, MARJORIE  
82 Street Address (P.O. Box Number is Not Acceptable)  
3540 NORTHLAKE BLVD  
83 PALM BEACH GARDENS  
84 City  
FL 85 Zip Code  
33403

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *M. Nusrala*  
Signature, typed or printed name of registered agent and the jurisdiction

(NOTE: Registered Agent signature required when re-stating)

4/27/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
0 NUSRALA, MARJORIE  
125 HYPOLUXO RD  
HYPOLUXO FL ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
NUSRALA, MARJORIE  
3540 NORTHLAKE BLVD  
HYPOLUXO PALM BEACH GARDENS FL  
33403 ☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. 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: *M. Nusrala*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/96 407-775-1888  
Date Daytime Phone

CR2E034 (12/95)