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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

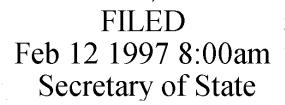
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # K20689

WORLD WIDE BAZAAR,INC.

(1)





Principal Place of Business 3540 NORTHLAKE BLVD PALM BEACH GARDENS FL 33403 US 2. Principal Place of Business 21 Suite, Apt. #, etc. 22		3540 NORTHL PALM BEACH US 2a. Mailing A 26	28. Mailing Address 26 Suite, Apt. #, etc.			3. Date Incorporated or Qualified 04/06/1988 05/01/1996 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired 58.75 Additional Fee Required	
City & State		City & Sta	ate			6. Election Campaign Financing \$5.0	00 May Be
23		28					ed to Fees
Zip	Country	Zip	-	Country	,	8. This corporation has liability for intangible tax unde	rs. 199.032,
24	25 9. Name and Address of Cur	29 29 Age	nt 3	0		Florida Statutes Yes No 10. Name and Address of New Registered Agent	
3540 PALM	RALA, MARJORIE NORTHLAKE BLVD M BEACH GARDENS FL 3340 The provisions of Sections 607.		lorida Statutes	83 84 , the above	City	orporation submits this statement for the purpose of changing ration's board of directors. I hereby accept the appointment	ip Code g Its registered
agent. Lan SIGNATURE	n familiar with, and accept the ob Signature, typed or printed name of registered	oligations of, Section 6	607.0505, Flori	da Statute:	S .	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NUSRALA, MARJORIE 3540 NORTHLAKE BLVD PALM BEACH GARDENS F		DELETE	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	- 1	[_] Chang	
TITLE NAME STREET ADORESS CITY-ST-ZIP			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CHY-	ADDRESS	: Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Ī.] DELETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CHY-	ADDRESS	□ Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DEFELE	4.1 TITLE 4. 2 NAME	I ADORESS	□ Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP		[DELETE	5.1 TITLE 5.2 NAME	T ADORESS	Chang	ge Addition
TITLE NAME STREET ADDRESS		C	DELETE	6.1 TITLE 6.2 NAME		Chang	ge Addition

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: