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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001531908
-07/07/95 --01029-010
*****225.00 *****225.00

DO NOT WRITE IN THIS SPACE.

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # K32 364
1. Corporation Name
Pass the Word Publications, Inc.

Principal Place of Business Mailing Address
1000 Spanish River Rd 102 NE 2nd ST #200
#4B BOCA RATON FL 33432
BOCA RATON FL 33432

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	3a. Date of Last Report
21 1000 Spanish River Rd	26 102 NE 2nd St	65-0118206	8/30/98
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4/6/94
22 4B	27 200	5. Certificate of Status Desired	Applied For
City & State	City & State	☐ \$8.75 Additional Fee Required	Not Applicable
23 BOCA RATON FL	28 BOCA RATON FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Zip	☐	
24 33432	29 33432	7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No
Country	Country		
25 USA	30 USA		

9. Name and Address of Current Registered Agent

Wayne Canton
5353 N. Federal Highway
Ft. Lauderdale, FL 33308

10. Name and Address of New Registered Agent

81 Name ~~Jenny Joy~~
82 Street Address (P.O. Box Number is Not Acceptable) ~~1000 Spanish River Rd. #4B~~
83 ~~BOCA RATON FL 33432~~
84 City ~~Boca Raton~~ FL 85 Zip Code ~~33432~~

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1. P.D.	1.1 TITLE	☐ Change ☐ Addition
NAME	Jenny Joy	1.2 NAME	
STREET ADDRESS	1000 Spanish River Road #4B	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL 33432	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/95

407.341.8211