


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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90060 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L 73312					
1. Corporation Name Time World, Inc ✓					
Principal Place of Business 18200 NW 27th Ave Suite 207 Miami FL 33056			Mailing Address		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 5-14-90	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 65-0200409	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent Hwang, Su Youn Sug 18200 NW 27th Ave Suite 207 Miami FL 33056			10. Name and Address of New Registered Agent		
81. Name			82. Street Address (P.O. Box Number is Not Acceptable)		
83.			84. City		
85. Zip Code			FL		
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: <u>Hwang</u> DATE: <u>4/29/99</u>					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. NAME D/P/S Hwang, Youn Sug 18200 NW 27th Ave #207 Miami FL 33056			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
2. NAME			1.2 NAME		
3. NAME			1.3 STREET ADDRESS		
4. NAME			1.4 CITY-ST-ZIP		
5. NAME			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
6. NAME			2.2 NAME		
7. NAME			2.3 STREET ADDRESS		
8. NAME			2.4 CITY-ST-ZIP		
9. NAME			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
10. NAME			3.2 NAME		
11. NAME			3.3 STREET ADDRESS		
12. NAME			3.4 CITY-ST-ZIP		
13. NAME			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
14. NAME			4.2 NAME		
15. NAME			4.3 STREET ADDRESS		
16. NAME			4.4 CITY-ST-ZIP		
17. NAME			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
18. NAME			5.2 NAME		
19. NAME			5.3 STREET ADDRESS		
20. NAME			5.4 CITY-ST-ZIP		
21. NAME			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
22. NAME			6.2 NAME		
23. NAME			6.3 STREET ADDRESS		
24. NAME			6.4 CITY-ST-ZIP		
14. I 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 contained 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, with all other like empowered.					
SIGNATURE: <u>Hwang</u> DATE: <u>4/29/99</u>					
Signature and typed or printed name of signing officer or director					