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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N30853

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INTERNATIONAL WORD COMMUNICATIONS, INC.

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Feb 04 1998	8:00am
Secretary o	f State

CO LINDA PRINCIPS COUNTY		NATIONAL WORD COMMUNI	CATIONS, INC.				
## 875 SW 88TH STREET. SUITE COSS \$75 SW 88TH STREET. SUITE COSS \$22 August 25	Principal Plac	ce of Business	Mailing Address			ITARE BIAIN BEBEC BIBER BURI	
2. Manual Company 2. Manual Company 2. Manual Manual Company 2. Manual C	6757 SW 88TH	STREET. SUITE C205	6757 SW 88TH STREET, SUIT	TE C205	02/24/1989 4. FEI Number		
Suite, Apr. 1, 43 Cb. Suite, Apr. 2, 42 Cb. Suite, Apr. 2, 42 Cb. Suite, Apr. 2, 43 Cb. Suite, Apr. 2, 44 Cb.	2. Principal P	Place of Business	2a. Mailing Address		1	A0 75	
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25p Country 25 3.3 7 C 50 DADE 29 3.3 7 C 30 DADE 29 3.3 7 C 20 DADE 29 20 DADE 29				-			***
9. Name and Address of Current Registered Agent DURISIN, JOE R 5799 STIRLING ROAD 110 HOLLYWOOD FL 33021 28 Street Address (P.O. Box Number is Not Acceptable) 89 City FL 80 Zip Code 11. Pursuant to the provisions of Sections 617 0000 and 617, 1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I arm familiar with, and accept the obligations of, Section 617, 0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I arm familiar with, and accept the obligations of, Section 617, 0503, Florida Statutes, SIGNATURE SUPPLIES AND A COFFICERS AND DIRECTORS 12. TITLE PD OFFICERS AND DIRECTORS IN 12 ITILE PP PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL ST DELETE 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL ST PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 1.2 LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 2. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMIF FL 3. SITEMAT ADDRESS 1.1 TITLE PERKINS, LINDA	Zip	Country	Zip		8. This corporation owes or has paid t	he current year Intan	ngible
DURISIN, JOE R 579 STERLING ROAD 110 HOLLYWOOD FL 33021 83 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City	24 3.31			o DADE			No
DURISIN, JOE R 579 STRLING ROAD 110 HOLLYWOOD FL 33021 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Porida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, or hoth and accept the obligations of, Section 617,0502 and 617,1508, Porida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or hoth, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0502, Porida Statutes, and appointment as registered agent, and accept the obligations of, Section 617,0502, Porida Statutes, and appointment as 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, 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, 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, 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, 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, or both and accept the obligations. I hereby accept the appointment as registered agent, or both and accept the obligations. I hereby accept the appointment as registered agent, or both and accept the obligations. I hereby accept the appointment as registered advent the purpose of Change and Addition	ļ	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regis	tered Agent	
STREING ROAD 110 HOLLYWOOD FL 33021 83 84 City FL 85 Zip Code				81 Name			
HOLLYWOOD FL 33021 83				32 Street Add	ress (P.O. Box Number is Not Acceptable)		
The pursuant to the provisions of Sections 617.0502 and 617.1508, 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, 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, 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, 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, or both in the provision of the provision of the provision of the provision of the purpose of changing its registered agent. SIGNATURE				83			
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SIGNATURE Signature, hybrid or private name of increased agent and little if applicables. (NOTE Registered Agent signature required when relevation) DATE						FL	
SIGNATURE Signature, hybrid or private name of increased agent and little if applicables. (NOTE Registered Agent signature required when relevation) DATE	11. Pursuant office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State of	and 617.1508, Florida Statutes of Florida. Such change was au	, the above-named corp thorized by the corporat	poration submits this statement for the purp tion's board of directors. I hereby accept the	lose of changing its raise appointment as re	registered egistered
Signature, Syeries or printing among an egent and like if appleables. (NOTE Registered Applet signature required when rehauding) DATE	!	em familiar with, and accept the obligation	tions of, Section 617.0503, Flori	da Ștatutes.			
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STREET ADDRESS 6.3 STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMI FL ST PERKINS, LINDA 6757 SW 88TH STREET C205 MIAMI FL VD COPELAND, MICHAEL 720 SW 5TH CT HALLANDALE FL D BERDIONE, ANTHONY 2717 SW 21 TERRACE	DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 YITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICER REMANS, LINDA 111 SW 88 STREET Jami FL 33176 REMANS, LINDA 111 SW 88 STREET C216	S AND DIRECTORS Change Change Change Change	Addition Addition Addition Addition
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I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sinde DUBLE RELINDS PERKINS

1/11/98 (305)274-1148

R2E037 (10/97)