## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State : DIVISION OF CORPORATIONS

1999

DOCUMENT # N43932

WORLDWIDE MARRIAGE ENCOUNTER OF SOUTHEAST FLORID A, INC.

Principal Place of Business 881 ZINNIA LANE PLANTATION FL 33317 Mailing Address

881 ZINNIA LANÉ PLANTATION FL 33317 US FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90056 006 \*\*\*\*61.25

<ol><li>Principal P</li></ol>	ace of Business 2a. Mailing	Address		3. Date incorporated or Qualifed	ì	
21 1017	22 SW 49 Manor 26 (	Same		06/17/1991		
Suite, Apt.	#, etc. Suite, A	pt. #, etc.		4. FEI Number	Applied For	
22	27			<b>65-029736</b> 2	Not Applicable	
City & Stat	City & S	State	10.3	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
			Country	6. Election Campaign Financing \$5.00 May Be		
24 33328 25 24 5 29 30				Trust Fund Contribution Added to Fees		
مـلــلـهــاب	9. Name and Address of Current Registered Ag			10. Name and Address of New Registered A	gent	
NATHEY FRANK A 82 Str				Scheer, William J. Address (P.O. Box Number is Not Acceptable)		
MULTIPLE LIVER OF				10/32 Sw. 49 Manor		
881 ZINNA LANE				83		
PLANTATION FL 33317					Test at O	
84 City Cooper City FL 85 Zip Code 3333						
11. 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Sloveture troad or printed name of societared agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	MATHEY, FRANK A.		1.2 NAME	Scheer, William J.	*	
STREET ADDRESS		1	1.3 STREET ADDRESS	10132 S.W. 49 Manor		
	881 ZINNIA LANE		1.4 CITY-ST-ZIP	Concer Cat. FL 33328		
CITY-ST-ZIP	PLANTATION FL	DELETE	2.1 TITLE	Cooper City, Fl 33328	Change Addition	
	VPD		2.2 NAME	Scheer, Cathy		
NAME	MATHEY, AGNES			10132 S.W. 49 Manar		
STREET ADDRESS	881 ZINNIA LANE		2.3 STREET ADDRESS			
CITY-ST-ZIP	PLANTATION FL		2.4 CITY-ST-ZIP	Cooper City, Fl 33328	Change	
TITLE	T		3.1 TITLE	The P	E Change	
NAME	RUIZ, OVELIO A.	ł	32 NAME	Ansoatesui, John R.		
STREET ADDRESS	8380 N.W. 29 ST.		3.3 STREET ADDRESS	8700 Taft Street		
CITY-ST-ZIP	SUNRISE FL		3.4. CITY-ST-ZIP	Penbroke Pines, FL 33024		
TITLE	S	DELETÉ	4.1 TITLE	\$	Change Addition	
NAME	RUIZ. BEATRIZ	ŀ	4. 2 NAME	Ansoategui, Maria H.		
STREET ADDRESS	8380 N.W. 29 ST.		4.3 STREET ADDRESS	S Ansoategui, Maria A. 8700 Tatt Street	)	
CITY-ST-ZIP	SUNRISE FL		4.4 CITY+ST-ZIP	Penbroko Pines, FL 33024	<u> </u>	
TITLE	D	DELETE	5.1 TITLE	Ď.	☐ Change ☐ Addition	
NAME	MOREJOX, RON		5.2 NAME	maximum Tarah		
STREET ADDRESS	9121 ORCHID TREE LANE		5.3 STREET ADDRESS	right hard, soseph		
			5.4 CITY+ST-ZIP	Marinaro, Joseph 16406 Diamond Head Driv Weston, FL 37371	<b>*</b> ;	
CITY-ST-ZIP TITLE	PEMBROKE PINES FL	DELETE	6.1 TITLE	() × 5 1 × 10 , 1	☐ Change ☐ Addition	
			6.2 NAME		-	
NAME			6.3 STREET ADDRESS			
STREET ADDRESS			6.4 CITY-ST-ZIP		•	
CITY OF TID	ł		0.4 CH 1-31*ZIF			

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 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, with all other like empowered.

SIGNATURE: Man SYLVATURE PROPERTY DAME OF SIGNING OFFICER OF DIRECTOR DAME OF SIGNATURE AND TYPED DE PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DIRECTOR DESCRIPTION OF SIGNATURE AND TYPED DE PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E037 (11/98)