

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N49543

1. Corporation Name

A- DRAMATIZED WORD INC.

Principal Place of Business

20520 BISCAYNE BLVD.  
AVENTURA, FLORIDA  
33180

Mailing Address

20941 NE 25 ct.  
NORTH MIAMI BEACH  
FLORIDA, 33180

2. Principal Place of Business

21 20520 BISCAYNE BLVD

Suite, Apt. #, etc

22 BUILDING #1

City & State

23 AVENTURA

Zip 33180

Country DADE

2a. Mailing Address

26 20941 NE 25 Ct.

Suite, Apt. #, etc

27 NORTH MIAMI BEACH

City & State

28 FL.

Zip 33180

Country DADE

3. Date Incorporated or Qualified

6/24/92

3a. Date of Last Report

2/18/98

4. FEI Number

65 -0343378

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

VICTORIA P. INWANG  
1172 NE 179 ST.  
N. MIAMI BEACH,  
FL. 33179

10. Name and Address of New Registered Agent

81 Name

NIKRU NWAObI

82 Street Address (P.O. Box Number is Not Acceptable)

20941 NORTH EAST 25th CT.

83

NORTH MIAMI BEACH

84 City

FL

85 Zip Code

33180

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

*Nikru Nwaobi*

(NOTE: Registered Agent signature required when reinstating)

2/18/98

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

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	NIKRU NWAObI
STREET ADDRESS	20941 N.E. 25 th ct.
CITY - ST - ZIP	N. MIAMI BEACH, FL 33180
TITLE	<input type="checkbox"/> DELETE
NAME	VICTOR PATRICK
STREET ADDRESS	13015 BISCAYNE BLVD, N MIAMI
CITY - ST - ZIP	FL. 33180
TITLE	<input type="checkbox"/> DELETE
NAME	EDMMA EKPENYONG
STREET ADDRESS	170 NE 158 ST. N, MIA.BEACH
CITY - ST - ZIP	FL. 33180
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Nikru Nwaobi*

2/18/98

Date

Daytime Phone #

CR2E037 (9/96)