

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 21 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000001194 (9)**

WORLD TREE, INC.



Principal Place of Business <b>990 NORTH EAST 89TH TERRACE MIAMI FL 33138</b>	Mailing Address <b>990 NORTH EAST 89TH TERRACE MIAMI FL 33138</b>
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2. Principal Place of Business 21 <b>990 N.E. 89TH TERRACE</b> Suite, Apt. #, etc. 22 City & State 23 <b>MIAMI, FLORIDA</b> Zip 24 <b>33138</b> Country 25 <b>U.S.A.</b>	2a. Mailing Address 26 <b>990 N.E. 89TH TERRACE</b> Suite, Apt. #, etc. 27 City & State 28 <b>MIAMI, FL 33138</b> Zip 29 <b>33138</b> Country 30 <b>U.S.A.</b>
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3. Date Incorporated or Qualified <b>03/07/1994</b>	4. FEI Number <b>65-0499797</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>SINGER, BERNARD A 4700 SHERIDAN STREET, STE. B HOLLYWOOD FL 33321</b>	
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81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			<b>FL</b>	

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 John A. Featherstone DATE 4-3-98

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PTD
NAME	FEATHERSTONE, JOHN
STREET ADDRESS	990 NORTH EAST 89TH TERRACE
CITY-ST-ZIP	MIAMI FL 33138
TITLE	SD
NAME	DELANO, SUSAN
STREET ADDRESS	2280 KEYSTONE BLVD.
CITY-ST-ZIP	N. MIAMI FL 33181
TITLE	VPD
NAME	GERARD, MOLLY
STREET ADDRESS	990 N.E. 89TH TERRACE
CITY-ST-ZIP	MIAMI FL 33138
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	SD
2.3 STREET ADDRESS	MARYANNA DAMASOHN
2.4 CITY-ST-ZIP	15817 66 COURT NORTH
3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME	LOXAHATCHEE, FLORIDA 33470
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
6.2 NAME	
6.3 STREET ADDRESS	
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 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: John A. Featherstone DATE: 4-3-98 PHONE: 1-305-7586543

Signature typed or printed name of signing officer or director

CR2E037 (10/97)