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NONPROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #

98 JUN -5 AH 8: 53 N96000000004 (9) ALT KITASSEE, PLORIDA CENTRAL AND SOUTH AMERICAN WORLD SECTOR, INC. Principal Place of Business Mailing Address 14750 N.W. 77TH COURT 14750 N.W. 77TH COURT 3. Date Incorporated or Qualified **8UITE 125** SUITE 125 12/29/1995 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 4. FEI Number Applied For 65-0639976 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional X 6. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 28] 23 Zip Country Zip Country B. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DE ANDA, JAIME L PH.D. 82 Street Address (P.O. Box Number is Not Acceptable) 14750 N.W. 77TH COURT 83 **SUITE 125** MIAMI LAKES FL 33016 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE DE ANDA, JAIME L PH.D. 05/09793--01121--008 NAME 1.2 NAME 14750 N.W. 77TH COURT, SUITE 125 STREET ADDRESS 1.3 STREET ADDRESS *****61.25 ****61.25 MIAM! LAKES FL 33016 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition SD 21 TITLE TITLE LAUZARDO, MARTA PH.D. 2.2 NAME 3663 SOUTH MIAMI AVENUE STREET ADDRESS 2.3 STREET ADDRESS MAMI FL 33133 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME STANBACK, C. FOSTER 3.2 NAME 14750 N.W. 77TH COURT, SUITE 125 STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Chang TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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

Jaime L. De Anda

5/18/98

(561) 637-2877