FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91343 047 ***550.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000115536

1. Entity Name

MID WORLD, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
12505 SW 53rd Ct.	12505 SW 53rd Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIRAMAR, FL.	City & State: MIRAMAR, FL.
Zip: 33027-5471 Country: USA	Zip: 33027-5471 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1063559 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: MARCO DIAZ

Street Address (P.O. Box Number is Not Acceptable): 12505 SW 53rd Ct.

City: Miramar FL Zip Code: 33027-5471

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE ✗ [signature] Marco Diaz May 2, 2002

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	ERAZO, EDUARDO
STREET ADDRESS	12505 SW 53rd Ct.
CITY-ST-ZIP	MIRAMAR, FL. 33027-5471
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] EDUARDO ERAZO May 2, 2002 (305) 450-0476

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #