FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

(2)

WORTH AVENUE LIMITED, INCORPORATED					
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Principal Plac	ce of Business	Mailing Address			. 1861 61611 81811 61611 61611 81613 61611 1261
5448 HOFFN	VER AVE.	5448 HOFFNER AVE.			
303 303 303 303 ORLANDO FL 32812 ORLANDO FL 32827		303 ORLANDO FL 32827	DO NOT WRITE IN THIS SPACE		
US	C Seore	US		3. Date Incorporated or Qualified	
		••		10/12/1990	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		98-0106623	Not Applicable
Suite, Apt.	. #, e1c.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		b. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23	-	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has	
24	25 9. Name and Address of Curre		30	Personal Property Tax due Ju 10. Name and Address of New I	
		III Negistered Agent	81 Name		redisteled whell
	EVERELL, CHRISTOPHER			haven then	16 AHER ~
	311 Parkland D r. Rlando fl 32803		82 Street Addr	ess (P.O. Box Number is Not Accept	able),
U	HLANDO PE 32003		83	& HOFFNER AV	
				re sess	
	•		84 City	Alm	FL 85 Zip Code 32812
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Florida Statutes	the above-named corr	poration submits this statement for the	<u> </u>
office or i	registered agent, or both, in the Stat	e of Florida. Such change was au	ithorized by the corporat	ion's board of directors. I hereby acc	cept the appointment as registered
•	am familiar with, and accept the oblig	gations of, Section 607,0505, Flori	oa Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NOTE.	Registered Agent signature requir	ed when (einstating)	DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DEVERELL, CHRISTOPHER	J.	1.2 NAME		
STREET ADDRESS	9801 LAKE NONA RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	2 1 TITLE		Change Addition
NAME	ROCKELL, BARRY C.	_	2.2 NAME	··-	
STREET ADDRESS	105 PARK STREET, WIY 3F	В	2.3 STREET ADDRESS		
CITY-ST-ZIP	LONDON, ENGLAND		2. 4 CITY-ST-ZIP		
TITLE	D OLINES IOLINES	☐ DELETE	3.1 TITLE		Change Addition
NAME	SUNLEY, JOHN B.	•	3.2 NAME		
STREET ADDRESS	105 PARK STREET, W1Y 3F	B	3.3 STREET ADDRESS		
CITY-ST-ZIP	LONDON, ENGLAND	Dr. Fre	3.4. CITY-ST-ZIP		
TITLE	S SUBMINIO CURRETORIES	DELETE	4.1 TITLE		Change Addition
NAME	BUNNING, CHRISTOPHER J		4. 2 NAME		
STREET ADDRESS	105 PARK STREET, W1Y 3F	D	4.3 STREET ADDRESS		
CITY-ST-ZIP	LONDON, ENGLAND	T DELETE	4.4 CITY - ST - ZIP		Channa Lazavan
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	54 CITY - ST - ZIP		Change Addition
TITLE		F" DETEN	61 TITLE		Change
NAME OXDEEX ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.