SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 1, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $188 (IF PAID AFTER, ADDITIONAL AMOUNT DUE TO REINSTATE: $500)

NONPROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 JUL 11 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P37496 **(7)**

1. Corporation Name
WORLD THRUST FILMS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
4217 WATER OAKS LANE TAMPA FL 33624 US	POST OFFICE BOX 20880 TAMPA FL 33622 US

3. Date Incorporated or Qualified: 02/14/1992
3a. Date of Last Report: 07/25/1994
4. FEI Number: 75-1535573 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No 75.00

2. Principal Place of Business	2a. Mailing Address
21 7901 Fourth Street N.	26 (Same as above)
Suite, Apt. #, etc. 22 #225	Suite, Apt. #, etc. 27
City & State 23 St. Petersburg FL	City & State 28
Zip / Country 24 33702 / 25 USA	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

GIBSON, JOHN, BROTHER
4217 WATER OAKS LANE
TAMPA FL 33624

10. Name and Address of New Registered Agent

31 Name (Same)
32 Street Address (P.O. Box Number is Not Acceptable) 7901 Fourth Street N. #225
33 St. Petersburg [illegible]
34 City FL 35 Zip Code 33702

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPM	1.1 TITLE	DPM ☒ Change ☐ Addition
NAME	GIBSON, BROTHER JOHN	1.2 NAME	GIBSON, BROTHER JOHN
STREET ADDRESS	4217 WATER OAKS LANE	1.3 STREET ADDRESS	7901 Fourth Street N. #225
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	St. Petersburg FL 33702
TITLE	SDT	2.1 TITLE	SDT ☒ Change ☐ Addition
NAME	EBY, ALICIA M.	2.2 NAME	EBY, ALICIA M.
STREET ADDRESS	4217 WATER OAKS LANE	2.3 STREET ADDRESS	7901 Fourth Street N. #225
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	ST.Petersburg FL 33702
TITLE	DV	3.1 TITLE	DV ☒ Change ☐ Addition
NAME	KIRKPATRICK, JOHN E. (ESQ.)	3.2 NAME	KIRKPATRICK, JOHN E. (ESQ.)
STREET ADDRESS	4131 DOUGLAS ROAD	3.3 STREET ADDRESS	2601 South Bayshore Dr. #865
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami FL 33133
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Brother John Gibson 7-7-95 813-677-2242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #

0013308