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

PROFIT CORPORATION ANNUAL REPORT

1998

Suite, Apt. #, etc

City & State

22

23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Suite, Apt. #, etc.

City & State

27

28

DOCUMENT # P9200002669 (9)

WORLDWIDE COMPUTER TECHNOLOGY, INC.

Principal Place of Business
Mailing Address
1008 CORAL WAY
CORAL GABLES FL 33134

2, Principal Place of Business
26

Zip Country Zip
25 29
9, Name and Address of Current Registered Agent

CUERVO, MARIO S 1008 CORAL WAY CORAL GABLES FL 33134 FILED
May 06 1998 8:00am
Secretary of State

	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualified

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

85 Zip Code

Yes Yes

98 305 444-9140

Not Applicable

11/06/1992

65-0370008

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature, typed or printed name of registered agent at	· · · · · · · · · · · · · · · · · · ·	legistored Agent signeture required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
12.	OFFICERS AND D	DELETE	13.	ADDITIONS/CHANGE			S IN 12		
TITLE	PD ALLERO	L_1 DELETE	1.1 TITLE			Change	L.J ADDITION		
NAME	CUERVO, MARIO S		1.2 NAME						
STREET ADDRESS	1008 CORAL WAY		1.3 STREET ADDRESS						
CITY-ST-ZIP	CORAL GABLES FL 33134		1.4 CITY - ST - ZIP						
TITLE	S TD	DELETE	2.1 TITLE			☐ Change	Additir		
NAME	Cuervo, zaydee s		2.2 NAME				£.		
STREET ADDRESS	1008 CORAL WAY		2.3 STREET ADDRESS				Í		
CITY-ST-ZIP	CORAL GABLES FL 33134		2. 4 CITY-ST-ZIP						
TITLE		DELETE	3.1 TITLE			Change	☐ Adk		
NAME			32 NAME						
STREET ADDRESS			3.3 STREET ADDRESS				/		
CITY-ST-ZIP			3.4. CITY-ST-ZIP				F		
TITLE		DELETE	4.1 TITLE			Change			
NAME			4.2 NAME						
STREET ADDRESS	**************************************	<i>:</i>	4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 TITLE			Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY - ST - ZIP						
TITLE		☐ DELETE	6.1 TITLE			Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP			6.4 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 suppliemental 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 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an addition									

Country

83 City

30