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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

Block 12 or Block 13 if changed,



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000088515 (0)

NEW WORLD INTERACTIVE, INC.

Principal Place of Business Mailing Address 7620 NW 25TH STREET 7620 NW 25TH STREET UNITS 4 8 5 UNITS 4 & 5 DO NOT WRITE IN THIS SPACE MIAMI FL 33122 MIAMI FL 33122 3. Date Incorporated or Qualified 12/29/1993 4. FEI Number 2. Principal Place of Business 26. Mailing Address Applied For 65-0473626 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Zω Country Country 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOODKIND, BRIAN K 2601 S BAYSHORE DR Street Address (P.O. Box Number is Not Acceptable) **SUITE 1600** 83 **MIAMI FL 33130** 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typical or printed round of registered agent and tile if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. X DELETE Change 1.1 TITLE TITLE HOMSANY, EZRA NAME 1.2 NAME 2335 NW 107TH AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-7IP CITY-ST-ZIP Addition DELETE 2.1 TITLE Change TITLE COHEN, EZRA NAME 2.2 NAME 2335 NW 107TH AVE 7620 N W 25th Street, Units 4 & 5 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL Miami, FL 33122 CITY-ST-ZIP 2.4 CITY - ST - ZIP X DELETE Change Addition TITLE 3.1 TITLE COHEN, MOISES NAME PLAZA PAITILLA OFICINA NO. 61 3.3 STREET ADDRESS STREET ADDRESS SANFRANCISCO PANAMA, CITY-ST-ZIP 3.4. CITY - \$1 - ZIP Change Addition X DELETE TITLE 4 1 TITLE GALEA, JOHN 4 2 NAME 2335 NW 107TH AVE., SUITE 2M-47 STREET ADDRESS 43 STREET ADDRESS **MIAMI FL 33172** CITY-ST-ZIP 4 4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP DELETE Change Addition TITLE 6.1 THILE NAME 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 supplied enter 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 of the receiver or true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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FILED

May 13 1998 8:00am

Secretary of State