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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000027093**

CHINA WORLDWIDE LTD., INC.

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90073 038 ***150.00



Principal Place of Business	Mailing Address			•
265 S. COCONUT LANE	265 S. COCONUT LANE			
PALM ISLAND	PALM ISLAND		DO NOT WE	RITE IN THIS SPACE
MIAMI BEACH FL 33139	MIAMI BEACH FL 33139			
,			3. Date Incorporated or Qualife	3
,			04/07/1994	
2. Principal Place of Business	2a. Mailing Address	A 190 . 191. 10	4. FEI Number	Applied For
	Nue 26 650 West	Avenue	65-0491236	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
± 2508	27 # 2508 -			Fee Required
City & State	City & State		6. Election Campaign Financing	
23 MIAMI BEACH FL	A 28 MIAHI BEAC	Country FLA	Trust Fund Contribution	Added to Fees
Zip Country	A Zip	7 11 00	8. This corporation owes the cu	
24 33139 25 US		<u>ы изтя</u>	Personal Property Tax. 10. Name and Address of New	
الله Name and Address o	f Current Registered Agent	81 Name	IV. Name and Address of New	Registered Agent
SALVO, LAWRENCE A		Name		
265 S. COCONUT LANE	•		ess (P.O. Box Number is Not Accep	table)
	• .		WEST AVENUE	
PALM ISLAND		83 #2501	ξ	
MIAMI BEACH FL 33139	• ••	84 City		85 Zip Code
		*MIBH		FL 33139
11. Pursuant to the provisions of Sections	607 0509 and 697 1508. Plends Statutes	, the above-named corporation	oration submits this statement for th	e purpose of changing its registered
agent. I am familiar with, and	o State of Elerida Such change was auth le abligations of, Section 607.0505, Florid	a Statutes.	in a board of directors, Thereby acc	
SIGNATURE		LAWRENCE	A. SALUÓ	3/31/49
Signature, typed or printed name of reg	istered agent and title if applicable. (NOTE: Re	egistered Agent signature required	d when reinstating)	DATE/
12. OFFIC	ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12
TITLE P	☐ DELETE	1.1 TITLE		Change Addition
NAME SALVO, LAWRENCE A		1.2 NAME		4 0-0
STREET ADDRESS 265-S. COCONUT LAN	e, palm island	1.3 STREET ADORESS	,50 West Aue,	
CITY-ST-ZIP - MIAMI BEACH FL 3313	9	1.4 CITY-ST-ZIP	TIAMI BENCH, FL.	
TITLÉ	☐ DELETE	2.1 TITLE	,	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS	·	
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		manus de la companya della companya
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETÉ	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		•
STREET ADDRESS		4.3 STREET ADDRESS		•
CITY-ST-ZIP		4.4 CITY-ST-ZIP		•
TITLE	DELETE	5.1 TITLE	N*-	☐ Change ☐ Addition
NAME	, —	5.2 NAME		_
STREET ADDRESS	•	5.3 STREET ADDRESS		
		5.4 CITY-ST-ZIP		
CITY-ST-ZIP	☐ DELETE	6.1 TITLE		Change Addition
	L. Delete	6.2 NAME	•	
NAME :		6.3 STREET ADDRESS		
STREET ADDRESS		6.4 CITY-ST-ZIP		
CITY-ST-ZIP		0.4 O(11-\$1-ZIP		

14. I hereby certify that the information supplied with this filing does not exactly 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 the 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 of the transfer of the corporation or the receiver of the transfer of the corporation or the receiver of the transfer of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporati

SIGNATURE: