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

CITY-ST-ZIP

FILED PROFIT May 15 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Socretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name P94000029129 (1) WORLDWIDE LUXURY HOMES, YACHTS AND PLANES SALES AND RELATED SERVICES, INC. Principal Place of Business Mailing Address 6917 COLLINS AVE SUITE 1611 6917 COLLINS AVE SUITE 1611 MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0483085 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BRENDA NESTOR** Nestor, Brenda Street Address (P.O. Box Number is Not Acceptable) 6917 COLLINS AVE. 82 1611 83 MIAMI BEACH FL 33141 Suite 1611 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of regeller of agent and thic if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition P/S/D **NESTOR, BRENDA** NAME 1.2 NAME 6917 COLLINS AVE SUITE 1611 STREET ADDRESS 13 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 33141 1.4 CITY - ST - ZIP DEFETE TITLE 2.1 TITLE Change Addition COLVIN, MELVIN R NAME 2.2 NAME 6917 COLLINS AVE., SUITE 1611 STREET ADDRESS 2.3 STREET ADDRESS MIAM! BEACH FL 33141 CITY-ST-ZIP 2. 4 CITY - ST - 7IP DELETE TITLE 3.1 TITLE Change K Addition Weychert, David W. NAME 3.2 NAME 6917 Collins Ave Suite 1611 STREET ADDRESS 3.3 STREET ADDRESS Miami Beach, FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7/P DELETE TITLE 5.1 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP DELETE TITLE Change Addition 6.1 1IILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 trustee 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 attactument with an address