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Feb 27 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000033056 (0)

1. Corporation Name:  
WORLD TRAVELERS NETWORK - MIAMI, INC.

Principal Place of Business  
601 CLEARWATER PARK ROAD  
WEST PALM BEACH FL 33401  
US

Mailing Address  
601 CLEARWATER PART ROAD  
WEST PALM BCH FL 33401-6233  
US



3. Date Incorporated or Qualified 05/02/1994  
3a. Date of Last Report 02/09/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-3261390  
Applied For Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATSON, WILLIAM L  
601 CLEARWATER PARK ROAD  
WEST PALM BEACH FL 33401

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
D	PAXSON, LOWELL W	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
601 CLEARWATER PARK ROAD		1.3 STREET ADDRESS	
WEST PALM BEACH FL		1.4 CITY-ST-ZIP	
PD	GOODMAN, DEAN	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
601 CLEARWATER PARK ROAD		2.2 NAME	
WEST PALM BEACH FL		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TD	MARK, JOHN	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
300 N 28TH TERRACE		3.2 NAME	
HOLLYWOOD FL 33020		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
S	WATSON, WILLIAM L.	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
601 CLEARWATER PARKROAD		4.2 NAME	
WEST PALM BEACH FL		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
VPO	ROSE, ROBERT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3000 NORTH 28TH TERRACE		5.2 NAME	
HOLLYWOOD FL 33020		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I do 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, or on an attachment with an address.

SIGNATURE:

Signature, typed or printed name of signing officer or director

1/14/97

(561) 459-4122

CR2E034 (9/96)