FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400050549

1. Corporation WORLDW Principal Place 1950 NE 135TH N. MIAMI FL 33	VIDE YACHT SALES INC. e of Business ST.	Mailing Address 1950 NE 135TH ST. N. MIAMI FL 33181			DO NOT WRITE IN THIS		
B					3. Date Incorporated or Qualifed 07/06/1994		
	Principal Place of Business 2a. Mailing Address				4. FEI Number	<u> </u>	plied For t Applicable
21 Suite Ant	26 Suite, Apt. #, etc. Suite, Apt. #, etc.				65-0503469	\$8.75	
22 Suite, Apt.	#, etc.	27			5. Certifcate of Status Desired	Fee Re	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year In	tangible	_
24	25	29 3	0		Personal Property Tax.	Yes	□No
	9. Name and Address of Cur	rrent Registered Agent		11 11	10. Name and Address of New Registered	Agent	
VAN	OLVE NEWGON DOGED		8	Name		_	
VAN SLYKE NEWSOM, ROGER 1950 NE 135TH ST.				2 Street Ad	ldress (P.O. Box Number is Not Acceptable)		
N. MIAMI FL 33181				,——			
14. 191	MANUTE SOTOT		8	'	_	_	
			84	City	FL	85 Zip (Code
office or n agent. I a	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered	ate of Florida, Such change was auth ligations of, Section 607.0505, Florid agent and title if applicable. (NOTE R	horized by la Statute	y the corpora s.	proration submits this statement for the purpose of ation's board of directors. I hereby accept the appoint the appoint of the purpose of the	millinent as re	gistered
12.		AND DIRECTORS	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	D NEWSOM, ROGER		1.1 IIILE				
NAME !	1950 NE 135TH ST.			ET ADDRESS			j
STREET ADDRESS	N. MIAMI FL 33181		1,4 CITY-				Ì
CITY-ST-ZIP TITLE	11. MIAMI FE 33101	☐ DELETE	2.1 TITLE	31-21		Change	☐ Addition
NAME		_ ===	2.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	·			
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	·	· -	3.2 NAME			· 	
STREET ADDRESS			3.3 STRE	ET ADORESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		_	
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAM	≣			ļ
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS			1
	1		54 CITY-	ST-7IP			J

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 releiver or frustee 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 adactingent with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

ELEQUIRED RINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

Addition