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FILED

Feb 12 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 # P94000060259 (6)

1. Corporation Name

WORLDWIDE COMPUTERS, INC.

Principal Place of Business

831 NORTH S.R. 434  
SUITE 1201-209  
ALTAMONTE SPRINGS FL 32714

Mailing Address

831 NORTH S.R. 434  
SUITE 1201-209  
ALTAMONTE SPRINGS FL 32714-7022



2. Principal Place of Business

21 5665 RED BUB LAKE RD.  
Suite, Apt. #, etc.

2a. Mailing Address

26 5665 RED BUB LAKE RD.  
Suite, Apt. #, etc.

22 City & State

23 Winter Springs FL  
ZIP Country

24 32708

25 USA

27 City & State

28 Winter Springs FL  
ZIP Country

29 32708

30 USA

3. Date Incorporated or Qualified

08/16/1994

3a. Date of Last Report

04/29/1996

4. FEI Number

59-3274031

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

PARRA, W D  
942 NORTH S.R. 434  
SUITE 1201-209  
ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent

81 Name W D PARRA

82 Street Address (P.O. Box Number is Not Acceptable)  
5665 RED BUB LAKE RD.

83

84 City Winter Springs

FL

85 Zip Code 32708

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 of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-6-97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME PARRA, W D  
STREET ADDRESS 931 NORTH S.R. 434 #1201-209  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition  
1.2 NAME PARRA, W D  
1.3 STREET ADDRESS 5665 RED BUB LAKE RD.  
1.4 CITY-ST-ZIP WINTER SPRINGS, FL 32708

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-97

Date

407-772-9115

Daytime Phone #

CR2E034 (9/96)