## 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 # P95000077673 . . .

WORLD AGENT CORPORATION

Principal Plac	e of Business	M	ailing Address			1991/291 (10 16/0)
1031 IVES DAIRY RD SUITE 228 "N-E" SUITE 228 "N-E" MIAMI FL 33179 MIAMI FL 33179					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
						10/05/1995
		Mailing Address	Mailing Address		4. FEI Number Applied For	
21 26					65-0612379   Not Applicab	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional Fee Required
City & State		27	City & State			<u> </u>
	te		City bi State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country	28	Zip	Country		This corporation owes the current year Intangible
24	25	29		30		Personal Property Tax. Yes No
24	9. Name and Address of Curr		stered Agent	100		10. Name and Address of New Registered Agent
		C. C. 3		81	Name	
KOCHMAN, IGOR 1031 IVES DAIRY RD			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
	TE 228 "N-E"					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MIAMI FL 33179						
	/ 2 33 3			84	City	El 85 Zip Code
SIGNATURE	im familiar with, and accept the obl	igations of	, Section 607.0505, Flo	rida Statutes	S.	on's board of directors. I hereby accept the appointment as registered
12.	OFFICERS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P		☐ DELETE	1.1 TITLE		Change Addit
NAME	I					
	SMIRNOV, ANDREY			1.2 NAME		
STREET ADDRESS	SMIRNOV, ANDREY   1031 IVES DAIRY RD #228				T ADDRESS	
STREET ADDRESS CITY-ST-ZIP						
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

01/06/99

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 

01-22-1999 90005 003 \*\*\*150.00