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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

SIGNATURE: MARIA L. MANRIQUE



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 16 1997 8:00am

Secretary of State

4/21/97 305-2746549

## Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P95000088165 (2)

WORLDWIDE INTERNATIONAL TRADING TEAM INC.

Principal Place of Business Mailing Address 8600 SW 109 AVE. 8600 SW 109 AVE. **SUITE #218 SUITE #218** MIAMI FL 33173-4487 MIAMI FL 33173 3. Date Incorporated or Qualified 3a. Date of Last Report 11/15/1995 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0625356 21 8600 S.W. 109th AVE. SAME 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 # 218 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 MIAMI FLORIDA 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 25 U.S.A. Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MANRIQUE, MARIA L 81 ANA MANRIQUE 8600 SW 109 AVE. Street Address (P.O. Box Number is Not Acceptable) 8600 5. W. 109±h AVE. 82 **SUITE #218** MIAMI FL 33173 83 # 218 FL 85 Zip Code 3 3 / 7 3

ibmits this statement for the purpose of changing its registered to directors. I hereby accept the appointment as registered City 84 MIAMI 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abo ned corr office or registered agent, or both, in the State of Florida. Such change was authorize agent it am familiar with, and accept the obligations of, Section 607.0505, Floride? "Imriou! MANRIQUE Iname of registered account SIGNATURE 5/7/97 OFFICERS AND DIRECTORS AUDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 Addition □ DELETE Change 1.1 THE 101 F VICE. PRESIDENT MANRIQUE, MARIA L SIANAF 1.2 NAME ANA MANRIQUE 8600 SW 109 AVE., #218 8600 S.W. 109th # 218 STREET ADORESS 1.3 STREET ADDRESS **MIAM! FL 33173** 1.4 CITY-ST-ZIP MIAMI FLORIDA 33173 CHY-ST-ZIP DELETE 21 TITLE THE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIE DELETE Change Addition 11" LE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 3.4. CITY - ST - ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STEET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TIRE NAME 5.2 NAME STHELT ADORESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE \_\_\_ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 supple 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.

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