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FILED  
Apr 25 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 # P95000091158 (2)

1. Corporation Name

NEW WORLD CENTER, INC.



Principal Place of Business

Mailing Address

6380 W 24 COURT BLDG 1 NO 107  
HIALEAH FL 33016

6380 W 24 COURT BLDG 1 NO 107  
HIALEAH FL 33016

3. Date Incorporated or Qualified

11/30/1995

3a. Date of Last Report

04/23/1996

2. Principal Place of Business

21 18275 NW 68th AVENUE

2a. Mailing Address

26 8200 NW 191 LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0628142

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

City & State

23 MIAMI, FLORIDA

City & State

28 MIAMI, FLORIDA

Zip Country

24 33015

Zip Country

29 33015-5356

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

LAW FIRM OF MANFRED ROSENOW, P.A.  
2425 CORAL WAY  
MIAMI FL 33145

10. Name and Address of New Registered Agent

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

TITLE PTD ☐ DELETE  
NAME PIEDRAHITA, RUTH P  
STREET ADDRESS 6380 W 24 CT BLDG 1 NO 107  
CITY-ST-ZIP HIALEAH FL 33016

TITLE VSD ☐ DELETE  
NAME CARDONA, JORGE E  
STREET ADDRESS 6380 W 24 CT BLDG 1 NO 107  
CITY-ST-ZIP HIALEAH FL 33016

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 ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 8200 NW 191 LANE  
1.4 CITY-ST-ZIP MIAMI, FL 33015-5356

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 8200 NW 191 LANE  
2.4 CITY-ST-ZIP MIAMI, FL 33015-5356

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 registered trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in this report or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

04/18/97

305-343-2238

CR2E034 (9/96)