

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000015517 (1)

1. Corporation Name

WINDOWS OF THE WORLD II, INC.

Principal Place of Business

1855 GRIFFIN ROAD, STE. 123A  
DANIA FL 33004

Mailing Address

1855 GRIFFIN ROAD, STE. 123A  
DANIA FL 33004-2239

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

NAJMAN, SONIA  
1855 GRIFFIN ROAD, STE. 123A  
DANIA FL 33004

81 Name Blanca Padron

82 Street Address (P.O. Box Number is Not Acceptable)  
1855 Griffin Rd.

83 Suite A123

84 City Dania

FL 85 Zip Code 33004

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 607.0105, Florida Statutes.

SIGNATURE

Blanca Padron

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-appointing)

3-24-97

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME NAJMAN, SONIA  
STREET ADDRESS 1855 GRIFFIN ROAD, STE. 123A  
CITY-ST-ZIP DANIA FL 33004

TITLE D  
NAME PADRON, BLANCA  
STREET ADDRESS 1855 GRIFFIN ROAD, STE. 123A  
CITY-ST-ZIP DANIA FL 33004

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary - S ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE President - P ☒ 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 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:

Blanca Padron

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-97 954-921-8336

Date

Daytime Phone #

0112070

FILED  
Apr 02 1997 8:00am  
Secretary of State



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