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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

| APPROVED |
|----------|
| AND      |
| FILED    |

97 AUG 13 PH 12: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| L COMPOSITION               | n Name  | -3101   |                                     |  |  |
|-----------------------------|---|---|-------------------------------------|--|--|
| -101                        | 15 12 1001 N CONSU  | LTING, LIKE                                   |                                     |  |  |
| TRAW WORLD CONSULTING, ITE. |   |   |                                     |  |  |
|                             |   |   |                                     |  |  |
| Principal Plac              | e of Business   | Mailing Address                               |                                     |  |  |
|                             | ilgINIA   |   |                                     |  |  |
| 25(0)                       | S   |   |                                     |  | •  |
| TALLA                       | hassee, FL 32301  |   |                                     |  |  |
|                             |   |   |                                     | 3. Date Incorporated or Qualifier  | 3a. Date of Last Report  |
| 6 Damana D                  | age of Business   | 2a. Mailing Address )                         |                                     | 4. FEI Number  |  |
| - PO 2 L 1                  | VIRGINIA  |   | STBROOKE DK                         | 59-33-72   | 305 Applied For Not Applicable   |
| Suite Apt                   |   | Suite. Apt. #, etc                            | CALLUKE DE                          | 0, 00 10.  | SR 75 Additional   |
| 22                          |   | 27  |                                     | 5. Certificate of Status Desired   | Fee Required   |
| City & State                | ε   | CityN State                                   | - 46                                | 6. Election Campaign Financing   | \$5.00 May Be  |
| 23 AL                       | LAMASSEE FL   | 28 WEST DLOC                                  | MFIELD M                            | Trust Fund Contribution  | ☐ Added to Fees  |
| Zip                         | Country   | ZIP/ Vann                                     | Country                             | 8. This corporation has liability for  | or intangible tax under s. 199 032.                                      |
| 24 323                      |   | 29 46522                                      | 130 USA                             | Florida Statutes   | Yes No   |
|                             | 9. Name and Address of Current  | Registered Agent                              | 81 Name                             | 10. Name and Address of New  | Registered Agent   |
|                             | 314   |   | 81 Name                             | ESTER B. WO  | ද්ව  |
| GERON                       | ne Dlackmon<br>73 Eagles Land   | . •   | 82 Street A                         | doress (P.O. Box Number is Not Accept  | able)  |
| 1616-                       | 73 backs land   | 1~J   | 83                                  | 12 DORRIC DR   | . Cus  |
|                             |   | _   | 63                                  |  |  |
| 1 mec                       | Ahass 66, FL 32   | .308  | 84 City                             | ALLA hassee  | FL 85 Zio Code 32503   |
| 11 Pursuant                 | to the provisions of Sections 607.0502  | >nd 607 1508 Florida Statu                    | tes the above-named o               | orporation submits this statement for the  |  |
| office or r                 | egistered agent, or both, in the State  | of Flor da Such change was                    | authorized by the corpo             | pration's board of directors. I hereby acc   | cept the appointment as registered                                       |
| agent I a                   | m familiar with, and accept the obliga  | tions of Section 607 0505. Fi                 | forida Statutes.                    |  |  |
| SIGNATURE                   | Signature riced or printed mame of repistered agen                                | familite fappicable (NO                       | *E. Registered Agent signature re   | cuired when reinstating)   | DATE   |
| 12.                         | OFFICERS AND  | DIRECTORS                                     | 13.                                 | ADDITIONS/CHANGES TO OF  | FICERS AND DIRECTORS IN 12   |
| TITLE                       | President .   | ☐ DELETE                                      | 1 1 TITLE                           | RESIDENT   | Change Addition  |
| NAME                        | motion A Cate   | nan   | 1 2 NAME                            | MATHEW S. CATIMA   | 0.05   |
| STREET ADDRESS              | will shortly only   | H   | 1.3 STREET ADDRESS                  | 6141 WESTBROOKS  | 02-100   |
| CITY-ST-ZIP                 | West Blomful  | mi 48322                                      |                                     | WEST BLOOMFIELD  | 0, 110 48322   |
| TITLE                       | Vict President  | ☐ DELETE                                      | 21 TITLE                            | VICE PLESIDENT   | Change Quidoition  |
| TIAME                       | MATTHEW C. Hil  | L   | 2.2 NAME                            | MATTHOW C. Hill  | 1.091)73   |
| STREET ADDRESS              | ZLGZ COLLEGE HIL  | i Circle                                      | 2 3 STREET ADDRESS                  | 2662 College Hill  | 7 ( 2173   |
| CITY - ST - ZIP             | Schaum burg, 1  | 00173 ☐ DELETE                                | 2 4 CITY-ST-ZIP                     | SCHAUMBUCS, 1  | L 60113  |
| TITLE                       | SECTY/TREASURER   |   | 3 1 TITLE<br>3 2 NAME               | SECRETARY - TREASUR  | Change 🔼 Addition  |
| NAME<br>STREET ADDRESS      | Sharon B. BELL  |   | 3 3 STREET ADDRESS                  | Sharon. B. Bell  |  |
|                             | 300 Th FRELD MI   | -48076  | 3.4 CITY-ST-ZIP                     | 21612 Ungines  | - 48076  |
| DITY-ST-ZIP<br>TITLE        | SOUTH FRELD, MIL  | DELETE  | 4.1 TITLE                           | SOUTHFIELD, I'LL   | Change Addition  |
| NAME                        |   |   | 4 2 NAME                            | Sanac  |  |
| STREET ADDRESS              |   |   | 4 3 STREET ADDRESS                  | -08/   | 2270675 3<br>19/97-01011-007   |
| CITY - ST - ZIP             |   |   | 4 4 CITY - ST - ZIP                 | 米米米  | *165.00 ****165.00   |
| TITLE                       |   | ☐ DELETÉ                                      | 5 1 TITLE                           |  | Change Addition  |
| NAME                        |   |   | 5.2 NAME                            |  |  |
| STREET ADDRESS              |   |   | 5 3 STREET ADDRESS                  |  |  |
| CITY -ST - ZIP              |   |   | 5.4 CiTY - ST - ZIP                 |  |  |
| TITLE                       |   | ☐ DELETE                                      | 61 TITLE                            | Malie  | Change Addition  |
| NAME                        |   |   | 62 NAME                             | Kigh   |  |
| STREET ADDRESS              |   |   | 63 STREET ADDRESS                   | h.   |  |
| CITY-ST-ZIP                 |   |   | 6.4 C/TY - ST - ZIP                 |  |  |
| 14. I do heret              | by certify that the information supplied in indicated on this annual report or si | with this filing does not qual                | lify for the exemption status and t | ited in Section 119.07(3)(i). Florida Stati<br>hat my signature shall have the same is | ites. I further certify that the gall effect as if made under oath, that |
| I am an o                   | !ficer or director of the corporation or  | the receiver or trustee empor                 | wered to execute this re            | port as required by Chapler 607, Florid  | a Statutes and that my name  |
| appears                     | n Block 12 or Block 13 if changed, or   | hu au <b>ait</b> aichmeur mitu <b>au' a</b> d | uress                               |  | 1  |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

8-11-91

313-544-1942

Daylung Priorie

## TRANS WORLD CONSULTING, INC.

6141 Westbrooke Drive, West Bloomfield, Mi 48322 Direct: (313) 594-1942 Phone: (810) 661-4805 Fax: (810) 661-8188

August 11, 1997

Florida Department of State Division of Corporation Annual Report Department P. O. Box 6327 Tallahassee, FL 32314

Dear Sir:

Re: Annual Report '97-TRANS WORLD CONSULTING, INC.

This letter is to inform the department that the enclosed form was requested by telephone. The corporation did not receive the first (1st) or second (2nd) notice. Per the conversation with Robyn, the enclosed \$165.00 fee is payment for the 1997 Annual Report of TRANS WORLD CONSULTING, INC., recorded as document #P96000025101.

In the interim, to avoid miscommunications, please forward all correspondence to the above listed address and the 'mailing' address' recorded on the application. If there are any questions contact Mathew Oatman at the above numbers.

CSincerely,

Mathew S. Oatman

TRANS WORLD CONSULTING, INC.

enclosures