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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 06 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000028676 (0) 1. Corporation Name

PARNELL WORLDWIDE, INC.

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Principal Place of Business Mailing		Mailing Address	···	
450 NE 91 STR	REET	450 NE 91 STREET		
MIAMI_FL 33138				
US SHOPES		MIAMIFL 33138 US TSHORES		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 03/27/1996
2, Principal Pia	ce of Business	2a. Mailing Address		4, FEI Number Applied For
21		26		65-0661652 Not Applicable
Suite, Apt. #, etc.		Suito, Apt #, etc.		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	7 p	Country	8. This corporation owes or has paid the current year Intangible
24	25	[29]	30	Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent				
SCHMIDHOFER, MARINNE MARIANNE				
450 NE 91ST ST			82 Street	Address (P.O. Box Number is Not Acceptable)
MIAMI SHORES FL 33138			83	· · · · · · · · · · · · · · · · · · ·
			63	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the			es, 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 agent. Lam familiar with and accept the obligations of, Section 807.0585, Florida Statutes.				
SIGNATURE MALLAW Schulholer				April 27, 1998
Stonatore type or presed manie of registered agreet and title diapplicable (NOTE Bo			Registered Agent signature	required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	POURHBUIGEED MANO DETER	☐ DELETE	1.1 TITLE	Change Addition
NAME	SCHMIDHOFER, HANS-PETER		1.2 NAME	· ·
STREET ADDRESS	450 NE 91ST STREET	<b>~</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI SHORES FL 33138	DELETE	1.4 CITY - ST - ZIP	Change Addition
TITLE NAME	SCHMIDHOFER, MARIANNE		2.1 TITLE	Change Addition
STREET ADDRESS	450 NE 91ST STREET		2.2 NAME	
1	MIAMI SHORES FL 3313	8	2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	WILLIAM OFFICE SOLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME		_	4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		☐ DELETE	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	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	·
44 114 2	all at a second of the second			2 - 0 - 2 - 440 03401/2 Ft - 14 - 01/2 - 14 - 14 - 14 - 14 - 14 - 14 - 14 - 1

Thereby 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 roport 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.

IGNATIBE:

MAUGE 1998 305 259-0014