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

Mailing Address

1040 ABADA COURT NE #111

PALM BAY FL 32905-3765

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000040983 (4)

WORLDWIDE MOVIES, INC.

Principal Place of Business

1040 ABADA COURT NE #111

PALM BAY FL 32905

3. Date Incorporated or Qualified 3a. Date of Last Report 05/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name loe. Brian r 3070 W LAKE MARY BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **LAKE MARY FL 32748** 83 **B4** City 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 agreet and title if applicable (NO³L. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETO Change TITLE 1.1 101.6 ___ Addition STOCKTON, KELLEY NAME 1.2 NAME 1040 ABADA CT NE #111 STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 32905 CITY - ST- 7IP 1.4 CHY-S1-ZIP DELETE Change Addition TITLE 2.1 TITLE **NUCKOLS, JEFF** NAME 2.2 NAME 221 CHALET AVE STREET ADDRESS 2.3 STREET ADDRESS INDIALANTIC FL 32903 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE TITLE 3.1 TITLE Change Addition FIELDS. HERBERT NAME 3.2 NAME 2223 PALM PL DR STREET ADDRESS 3.3 STREET ADDRESS PALM BAY FL 32905 CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE SATING 5.2 NAME * ** STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP 🔲 DELÉTE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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 execute this report as required by Chapter 607, Florida Statutes; and that my name