

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000047038

1. Entity Name

World Holdings Co.

FILED
Jun 06, 2000 8:00 am
Secretary of State

06-06-2000 90005 045 ***150.00

Principal Place of Business

Mailing Address

1340 COLLINS AVENUE

1340 COLLINS AVENUE

MIAMI BEACH FL 33139

MIAMI BEACH, FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0670143

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRITO & BRITO
407 LINCOLN ROAD, #5B
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

GROH, GOETZ
1301 COLLINS AVENUE, T4
MIAMI BEACH FL 33139

TITLE NAME ☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition

GROH, GOETZ
VIA DI VILLA ALBANI 24, #5
00198 ROMA ITALY

TITLE NAME ☐ Change ☒ Addition

MONTEL LIBIANA
1245 ELLIOT AVENUE
MIAMI, FL 33139

TITLE NAME ☐ Change ☐ Addition

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13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LIBIANA MONTEL

Date

Daytime Phone #

05/20/00

305 534 2353

CR2E034 (9/99)