## 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 # P96000056116 (2)

WORLDWIDE ENVIRONMENTAL GROUP, INC.

Principal Place of Business

Mailing Address

424C S.E. 47TH TERRACE CAPE CORAL FL 33904

424C S.E. 47TH TERRACE CAPE CORAL FL 33904-8513

## FILED May 09 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified	3a. Da	e of Last	Report	
					07/01/1996				
	lace of Business	2a. Mailing Address			4. FEt Number			applied For	
21 SAM		26 SAME AS ABOUT		65-0662777		Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State	0	City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip				Bunky  8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
9, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent						
Ech	OSITO, GREGORY F JR.	Tioglotolog Agont	81	Name		gistorou r			
				87 Name SAME					
8016 WILES ROAD SUITE 9				82 Strect Address (P.O. Box Number is Not Acceptable)					
			83	<u> </u>					
CUH	IAL SPRINGS FL 33067		"						
ı			84	City		FI	<b>85</b> Zip	Code	
44 5	10.40-	and COZ 4500 Florida Con Anna			1 2 1 2 2		<u> </u>		
office or r	egistered agent, or both, in the State (	of Florida. Such change was author	orized bi	v the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of at the appo	cnanging sintment a	its registered s registered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statute	ŝ. ,	,	.,,,			
SIGNATURE									
	Signature, typed or printed name of registered ager			ent signature requir	red when reinstating)	DATE	DIDECTO	550 (1) 40	
12.	OFFICERS AND	DELETE	13.	T	ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	PRS IN 12 Addition	
1	CIARAMITARO, MARIA C		1.1 TITLE	1			Change	L_J AGGIIIOII	
NAME		1.2 N/							
STREET ADDRESS	424C S.E. 47TH TERRACE	DE CODAL EL 20004		1 ADDRESS					
CITY-ST-ZIP	CAPE CORAL FL 33904	105-616	1.4 CITY - S	\$1-2IP			<del></del> -	····	
TITLE	DIRECTOR	DELETE	2.1 TITLE	l l			Change	Addition	
NAME GEORGE FURLAN) STREET ADDRESS 424C SE 4741, TE CITY-ST-ZIP CAPE CORAL FL.		<i>\</i> 2	2.2 NAME.						
STREET ADDRESS 424C SE 47+11		TERRACE	23 STREET ADDRESS						
CITY-ST-ZIP	CAPE CORAL F	1.33404	2 4 CITY-	ST-ZIP					
TITLE	L_] DELETE   31		31 TATLE				Change	Addition	
NAME	÷		3.2 NAME						
STREET ADDRESS		i i	3.3 STREET	1 ADDRESS				ļ	
CITY-ST-ZIP			3.4 CITY-	ST-ZIP				j	
TITLE	☐ DELETE 4.1		4.1 TITLE				Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	1 ADDRESS					
CITY-ST-ZIP	ST-ZIP 4.4		4.4 CHY- S	ST-ZIP					
TITLE		DELETE 5.17		<del></del>			Change	Addition	
NAME		ļ	5.2 NAME						
STREET ADDRESS			5.3 STREET	T ADDRESS					
CITY-ST-ZIP			5.4 ICITY - S						
TITLE		DELETE	6.1 THLE	V1 211			Change	Addition	
NAME			6.2 NAME						
		i		1 ADODEDO					
STREET ADDRESS				1 ADDRESS					
CITY-ST-ZIP			6.4 CITY - S	ST-ZIP	41. O				

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. If further certify that the 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 44.