


**FILED**  
**May 05, 1999 8:00 am**  
**Secretary of State**

05-05-1999 90103 008 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000063825**

1. Corporation Name  
**GENEVA WORLD VENTURES, INC.**



Principal Place of Business  
**4801 N.W. 17TH WAY**  
**SUITE 405**  
**FT. LAUDERDALE FL 33309-3773**  
**US**

Mailing Address  
**4801 N.W. 17TH WAY**  
**SUITE 405**  
**FT. LAUDERDALE FL 33309-3773**  
**US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21 <b>3840 W. HILLSBORO BLVD</b>		26 <b>3840 W. HILLSBORO BLVD</b>		07/26/1996		65-0739118		Not Applicable	
22 Suite, Apt. #, etc. <b>PMB 156</b>		27 Suite, Apt. #, etc. <b>PMB 156</b>		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
23 City & State <b>DEERFIELD BEACH FL</b>		28 City & State <b>DEERFIELD BEACH FL</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees			
24 Zip <b>33442</b>		29 Zip <b>33442</b>		30 Country <b>USA</b>		31 Country <b>USA</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## 9. Name and Address of Current Registered Agent

**PARADISO, DON A**  
**5874 DEERFIELD PLACE**  
**LAKE WORTH FL 33463**

## 10. Name and Address of New Registered Agent

81 Name **FRED E. MORGENSTEIN**

82 Street Address (P.O. Box Number is Not Acceptable)  
**3840 W. HILLSBORO BLVD PMB 156**

83

84 City **DEERFIELD BEACH FL**

85 Zip Code **33442**

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 agent and title if applicable.

**FRED E. MORGENSTEIN****MAY 10, 1999**

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 appears in Block 12 or Block 13 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

04/28/99

561 338 0477

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