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 # P96000073205 (2)

NETWORLDTRON CORPORATION

Principal Place of Business 1450 CORAL WAY, STE, 10 Mailing Address

1450 CORAL WAY, STE. 10

FILED Feb 24 1997 8:00am Secretary of State



MIAMI FL 3314	15	MIAMI FL 33145-2856			
					3. Date Incorporated or Qualified 3a, Date of Last Report 09/04/1996
2. Principal F 21	Place of Business	2a. Mailing Address 26			4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt	#, etc	Surie, Apt. #, etc.			Certificate of Status Desired
City & Stat 23	te	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	30	untry	This corporation has liability for intangible tax under s. 199.032, Florida Statutes
	9, Name and Address of Curre	and the second s	1001	<u> </u>	10, Name and Address of New Registered Agent
PADRON, CARLOS E 1450 CORAL WAY, STE. 10 MIAMI FL 33145				81 Name And M Digz 82 Street Address (P.O. Box Number is Not Acceptable) 83 .	
				84 City	niami FL FL \$ 3375
11. Pursuant office or i	to the provisions of Sections 607.05 registrical agent, or both, in the stat	02 and 607.1508, Florida Statu e of Florida. Such change was	ites, the a authorize	bove-named d by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent ∔a SIGNATURE	ani tahlilih witti and a dept the doli	gations of, Section 607.0505, F	lorida Sta	tutes.	2/18/97
SIGNATION.	Signa V Co plend name a registered a	gere short harif applicable (NO	TE Registere	d Agent signature	required when reinstating) DATE
12.	OFFICERS AF	ND DIRECTORS	13.	7	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1816		DELETE		ILL Pres.	Sheridan Dickinson Schange Addition
NAME			1.2 N	AME	1450 coral way Ste 10
STREET ADDRESS			1.3 S	TREET ADDRESS	miami FL 33145
CITY - S1 - ZIP				TY-SI-ZIP	
11118		☐ DELETE	2.1 T		Change Addition
NAME			2.2 N		the second secon
STREET ADDRESS				TREET ADDRESS	
CHTY-S1-ZIP		Document		HTY-ST-ZIP	
1016		DELETE	3.1 1		Change Addition
NAME			3.2 N		
STREET ADDRESS				TREET ADDRESS	
CITY-S1-ZIP TILLE		DELETE	3.4. L 4.1 T	DITY-ST-ZiP	Change Addition
NAME		La bettie	4.21		- Change C Audition
STREET ADDRESS				TREET ADDRESS	
CITY-ST-ZIP					
Title		DELETE	5.1 T	ITY-ST-ZIP	Change Addition
NAME			5.2 N		- Change La Rountel
STREET ADDRESS				TREET ADDRESS	:
CITY-ST-7IP TOLE		DELETE	5.4 C	ITY-ST-ZIP	☐ Change ☐ Addition
NAME		tal occur	6.2 N	1	
STREET ADDRESS					
				TREET ADDRESS	
CHY-S1-ZiP	by certify that the information suppli	ad with this filing does not ausi		ITY-ST-ZIP	tated in Section 119 07/3V/) Florida Statutas I further certify that the

4. I do horeby certify that the information supplied will his 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 equilar report or supprimental ampol 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 coloration or the processor or rustice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change if or on all attachment with an address.

SIGNATURE:

2/18/97 (306)858-0414