

FILED

Mar 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Mar 24 1997 8:00am Secretary of State	
DOCUMENT # P96000077177 (9)					
1. Corporation Name WORLDWIDE AMENITIES CORPORATION					
Principal Place of Business 12525 N.E. 13 AVENUE SUITE 408 MIAMI FL 33161			Mailing Address 12525 N.E. 13 AVENUE SUITE 408 MIAMI FL 33161-5133		
2. Principal Place of Business			2a. Mailing Address		3. Date Incorporated or Qualified 09/17/1996
21 Suite, Apt. #, etc.			26 Suite, Apt. #, etc.		3a. Date of Last Report
22 City & State			27 City & State		4. FEI Number
23 Zip			28 Country		5. Certificate of Status Desired
24			30		6. Election Campaign Financing Trust Fund Contribution
9. Name and Address of Current Registered Agent PAGAN, ANA M 12525 N.E. 13 AVENUE SUITE 408 MIAMI FL 33161			10. Name and Address of New Registered Agent		
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.			81 Name		
SIGNATURE			82 Street Address (P.O. Box Number is Not Acceptable)		
3-11-97			83		
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. TITLE D NAME PAGAN, ANA M STREET ADDRESS 12525 N.E. 13 AVENUE, #408 CITY-ST-ZIP MIAMI FL 33161			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
2. TITLE NAME STREET ADDRESS CITY-ST-ZIP			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
3. TITLE NAME STREET ADDRESS CITY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
4. TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
5. TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
6. TITLE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 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 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. 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.			600002122926 -03/25/97--01009--011 ***165.00		
SIGNATURE			3-11-97 643-224832		