## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000079171 (0)

**EMIT WORLDWIDE CORPORATION** 

FILED

99 JAN -4 AM 9: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address							
6301 NW 5TH	I WAY	6301 NW 5TH WAY					
STE 1400		STE 1400				DO NOT WRITE IN THIS SPACE	
FORT LAUDERDALE FL 33335		FORT LAUDERDALE FL 33335 US			f	3. Date Incorporated or Qualified	
03		00				09/24/1996	
0.00-1-10	land of Division	O Mallian Address					
2. Principal Place of Business		2a. Mailing Address	<b>⊢</b> ¬		,		
Suite Act # etc		26				APPLIED FOR 0788800. Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Security Securi	1	
City & State		27 Chu & State	City & State				
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees		
Zip Country		Zip Country			8. This corporation owes or has paid the current year Intangible	-	
<b>⊢</b> '	25	29 30		,		Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Current Registered Agent			_		10. Name and Address of New Registered Agent	
RICHARDS, GRANT				1	Name		
	DI NW 5TH WAY			L			.,
	ITE 1400			2	Street Addres	ss (P.O. Box Number is Not Acceptable)	
	RT LAUDERDALE FL 33309	ŀ		3			
•			84	1	City	■■ 85 Zip Code	$\dashv$
dd Disserve	to the eventure of Costings CO7 OFO	2 and CO7 1E09 Elevido Statu	too the char		nomed corns	FL	be
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	m lamiliar with and accept the conge	-		,			
	Signature, typed or printed name of registered age			jent	t signature required		_
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DIGITATION OF THE	☐ DELETE	1,1 TITLE			L Change L Addi	tion
NAME	RICHARDS, GRANT		1,2 NAME		i	i	
STREET ADDRESS	POST OFFICE BOX 21364 N/A	·	1,3 STREE	TA	DDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33335		1.4 CITY-	ST-	·ZIP		
TITLE	D	☐ DELETE	2.1 TITLE			Change Addi	tion
NAME	Vaughn, C. Ellis		2.2 NAME			9000027359299	
RREET ADDRESS	6301 NW 5TH WAY SUITE 14	00	2.3 STREE	T A	DDRESS	-01/11/9901011021	
CITY-S7-ZIP-	ST-ZIP FORT LAUDERDALE FL 33309			2. 4 CITY-SI-ZIP		<u>****150.00</u> ****150.00	
TITLE	D	DELETE	3.1 TITLE			☐ Change ☐ Addi	tìon [
NAME !	HEATH, WILLIAM P III		3,2 NAME				
STREET ADDRESS	511 BAYSHORE DRIVE		3.3 STREE	T A	DORESS	·	İ
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	;	3.4. CITY-	·ST-	- Ž(P		
TITLE		☐ DELETE	4.1 TITLE			Change Addi	tion
NAME			4. 2 NAME	Ε			ŧ
STREET ADDRESS			4.3 STREE	T AL	DDRESS		l
CITY-ST-ZIP			4.4 CITY-	ST-	- ZIP		
TITLE		DELETE	5.1 TITLE	-		Change Addit	tion
NAME			5.2 NAME				- 1
STREET ADDRESS			5.3 STREE		DDRESS	$\bigcap (\lambda_1)$	
CITY-ST-ZIP			5.4 CITY-		1	/ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
TITLE		DELETE	6.1 TITLE	٠,١		Change Addit	tion
NAME			6.2 NAME				
f 1					DODECC		-
STREET ADDRESS			6.3 STREE			D 3 150	

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 of 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 attached the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the receiv

SIGNATURE:

1/12/97 954 9587203



12/16/98

Division of Corporations Annual Report Section PO Box 6327 Tallahassee, FL 32314

Re: Annual Corporate Filing

To Whom It May Concern:

Please find attached the Annual Corporate Filing that was returned to us because the FEI number was invalid. We then in turn contacted the IRS to request documentation of the correct FEI number. (As you may be aware the time frame for a response from IRS can and does take a considerable amount of time). Hence, we have received written confirmation of our correct FEI number, (650788800).

Included with this letter is the original filing document, a copy of the letter that was sent with it when it was returned to us. The letter from the IRS showing the FEI number, and a check enclosed in the amount of \$150.00 to satisfy the error. We would like to ask for this one time exception.

Thank you for your cooperation

Sincerely,

Trudyelleh Richards Administrator