

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

FILED
May 05 1998 8:00am
Secretary of State

DOCUMENT # P96000087826 (9)

1. Corporation Name

WORLDWIDE FINANCIAL MANAGEMENT ASSOCIATES, INC.



Principal Place of Business

Mailing Address

2699 COLLINS AVE
STE 107-108
MIAMI BEACH FL 33140
US

1521 ALTON RD
STE 364
MIAMI BEACH FL 33139
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 300 South Pointe Dr

Suite, Apt., etc.

22 Unit 4306

City & State

23 Miami Beach, FL

Zip

24 33139

Country

25 USA

2a. Mailing Address

26 1521 Alton Rd

Suite, Apt., etc.

27 Suite 364

City & State

28 Miami Beach FL

Zip

29 33139

Country

30 USA

3. Date Incorporated or Qualified

10/23/1996

4. FEI Number

41-1853810

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes

No

9. Name and Address of Current Registered Agent

ANDERSON, KAYE
1521 ALTON RD, STE 364
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name

Larry Wolfe

82 Street Address (P.O. Box Number is Not Acceptable)

200-A John Knox Road

83

84 City

Tallahassee

FL

85 Zip Code

32303-6613

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

4/30/98

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ANDERSON, KAYE
STREET ADDRESS 1521 ALTON RD, STE 364
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME D/P/T
Kaye Anderson-Kerr
1.3 STREET ADDRESS 1521 Alton Rd, Suite 364
1.4 CITY-ST-ZIP Miami Beach, FL 33139

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME S
Diana Sosa-Monzalez
2.3 STREET ADDRESS 1521 Alton Rd, Suite 364
2.4 CITY-ST-ZIP Miami Beach, FL 33139

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

100002512631
-05/06/98--01015-0033
***158.75

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.

SIGNATURE:

Kaye Anderson-Kerr

4-29-98 (305)585-0023

CR2E034 (10/97)