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

POCUMENT #

CL P97000025968 (3) WORLD SIGNATURE INTERNATIONAL, INC. Principal Place of Business Mailing Address 1500 NE 131ST STREET 1500 NE 131ST STREET NORTH MIAMI FL 33181 NORTH MIAMI FL 33181 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/21/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARBIN, EVAN R ESQ.

48 EAST FLAGLER STREET 82 Street Address (P.O. Box Number is Not Acceptable) PENTHOUSE 104 83 **MIAMI FL 33131** 84 City Zip Code

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 (NOTE: Registered Agent signature required when reinstating) (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETÉ Change Addition TITLE 1 1 TITLE NAME **CARR, JERRY** 1.2 NAME 1500 NE 131ST STREET STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL 33181 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 C(TY-ST-Z)F DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

Athis filing floes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information a inual reput is true and occurate and that my signature shall have the same legal effect as if made under oath; that I am an 14. I hereby certify that the information indicated on this annual report or sy officer or director of the corporation Block 12 or Block 13 if changed, in courate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statules; and that my name appears in ahnual rend

16/2/18

FILED

Secretary of State

May 28 1998 8:00am