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

PROFIT

SIGNATURE:

Apr 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name P97000035236 (3) SHOPPERS WORLD, INC Principal Place of Business Mailing Address 1830 HYPOLUXO ROAD #8-8 1830 HYPOLUXO ROAD #B-8 LAKE WORTH FL 33462 LAKE WORTH FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/18/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 224 224 DAYURA 21 65-0747761 Not Applicable Suite, Apt. #. \$8.75 Additional 5. Certificate of Status Desired 411 411 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing WEST 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible DALM REDICH 25 MLM BEACH 29 X Yes ☐ No Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KAPLAN, SEYMOUR Name KAPLAM S BY MOUR 1830 HYPOLUXO ROAD #B-8 ress (P.O. Box Number is Not Acceptable) 82 Street Add LAKE WORTH FL 33462 HY 234 DATURA В3 84 Zip Code 33467/ 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE RESIDENT Change Addition TITLE 1.1 TITLE 5 & y mous NAME 1.2 NAME PATURN STREET ADDRESS 1.3 STREET ADDRESS 33401 WEST-PALM BEACH CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE 22 NAME NAMÉ STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-S1-ZIP DLLETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change TITLE 4.1 T(T).E Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 10115 NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CHTY-ST-ZIF 5.4 CITY - ST - ZIP DELETE Change Addition TITLE G.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information indicated on this annual report or suppliencental 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 13 if changed, or on an attachment with an address.

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