03-04-1999 90162 026 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # DO

<ol> <li>Corporation</li> </ol>	ORLD DESIGN, INC.	JU44965			
Principal Place of Business Mailing Address					
1422 NORWOOD AVE. P.O. BOX 879 TITUSVILLE FL 32781 TITUSVILLE FL 32781-0879					DO NOT WRITE IN THIS SPACE
		US			3. Date Incorporated or Qualifed
					05/20/1997
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21 26				<b>59-3448488</b> Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
27					Lee Kednien
City & State City & State					6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip			Country		8. This corporation owes the current year Intangible
4 25 29 30			0		Personal Property Tax. Yes No
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Registered Agent
LAURETTA, ANTONIO			82		Address (P.O. Box Number is Not Acceptable)
1422 NORWOOD AVENUE TITUSVILLE FL 32796			83	- Street Ac	Total Control of the
,,,,	311EE 7 E 32733		55		
			84	City	FL 85 Zip Code
agent. I a	agistered agent, or both, in the Stat in familiar with, and accept the oblig Signature, typed or printed name of registered as	gations of, Section 607.0505, Florid	a Statutes		ration's board of directors. I hereby accept the appointment as registered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE		THE TENDERS
NAME	LAURETTA, ANTONIO		1.2 NAME		Antonio Lauretta 1422 Norwood Avenue
STREET ADDRESS	1422 NORWOOD AVE.		1.3 STREET		Titusville, FI 32796
CITY-ST-ZIP	TITUSVILLE FL 32781	☐ DELETE	1.4 CITY-S 2.1 TITLE		
TITLE NAME			2.2 NAME		President P Lichange MADDITION   Billy F. Griffin
STREET ADDRESS			2.3 STREET	ADORESS	463 Brozman Lane
CITY-ST-ZIP			2.4 CITY-S		Cocoa FL 32927
TITLE			3.1 TITLE	1	Vice - President V Change MAddition
NAME			3.2 NAME	وا	Denise M. Griffin
STREET ADDRESS			3.3 STREET	ADDRESS 4	463 Brozman Lanc
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	Cocoa, FL 32927
TITLE		☐ DELETE	4.1 TITLE	{	Socretary / Treasurer S/T Change XAddition Debra A. Lauretta
NAME			4.2 NAME	7	Debra A. Lauretta
STREET ADDRESS			4.3 STREET	ADDRÉSS	1422 Norwood Avenue
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	Titusville, FL 32796
TITLE		☐ DELETE	5.1 TITLE	İ	Change Addition
NAME			5.3 STREET	ADDRESS	
STREET ADDRESS			5.4 CITY-S	1	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	1-71L	☐ Change ☐ Addition
TITLE NAME		- Princip	6.2 NAME		1974
STREET ADDRESS			6.3 STREET	FADORESS	,

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 emplowered 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Debra A Lawetta S/T