

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 # P97000047380

1. Corporation Name

NEW WORLD INTERNATIONAL CORPORATION

Principal Place of Business

380-71ST STREET
#600
MIAMI BEACH FL 33141
US

Mailing Address

5760 LA GORCE DR
MIAMI BEACH FL 33140
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1997

2. Principal Place of Business

21 925 Arthur Godfrey Road

2a. Mailing Address

26 925 Arthur Godfrey Road

4. FEI Number

65-0764727

Applied For

Not Applicable

22 102

27 102

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

23 City & State

MIAMI BEACH, Florida

28 City & State

MIAMI BEACH, Florida

6. Election Campaign Financing

□

\$5.00 May Be
Added to Fees

24 Zip

33140

25 Country

MIAMI-DADE

29 Zip

33140

30 Country

MIAMI-DADE

8. This corporation owes the current year Intangible

Personal Property Tax.

□ Yes

□ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUSTAN HERNANDO, GLADYS
880-71ST STREET
SUITE 600
MIAMI BEACH FL 33141

81 Name 5760 LA GORCE DR.

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

MIAMI BEACH, FLORIDA

83

84 City MIAMI BEACH

FL

85 Zip Code 33140

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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME HERNANDO, GLADYS R
STREET ADDRESS 5760 LA GORCE DR.
CITY-ST-ZIP MIAMI BEACH FL 33140

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE VPCO ☒ DELETE

NAME ROBINS, ANN MARIE
STREET ADDRESS 5760 LA GORCE DR.
CITY-ST-ZIP MIAMI BEACH FL 33140

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *Gladys R. Hernando* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99

(305) 604 8776

Date

Daytime Phone

Ext 122

0573413

CR2E034 (1/98)

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90219 031 ***158.75

