

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 22 1998 8:00am
Secretary of State

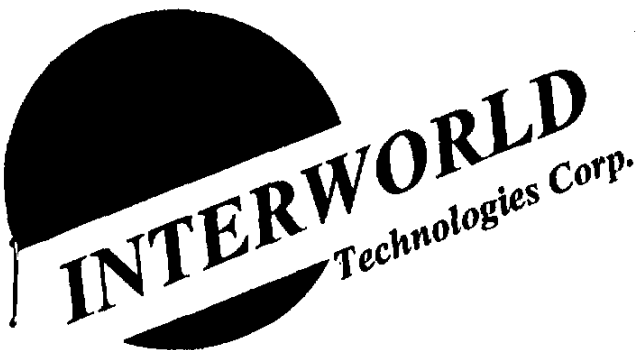
PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000055574			
1. Corporation Name Interworld Technologies Corp. 19650 N.W. 83 Ave Miami, Florida 33015			
Principal Place of Business		Mailing Address	
Interworld Technologies Corp 19650 N.W. 83 Ave Miami, FL 33015			
2. Principal Place of Business		2a. Mailing Address	
21 19650 NW 83 Ave.	26 Suite, Apt. #, etc.	27 Same	
22 City & State	27 City & State	28	
23 Miami FL	28	29	
24 Zip 33015	25 State FL	30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
German Naranjo 19650 NW 83 Ave. Miami, FL 33015		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		85 Zip Code	
		FL	
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 types for 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	President	1.1 TITLE	Change Addition
NAME	German NARANJO	1.2 NAME	
STREET ADDRESS	19650 NW 83 Ave	1.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33015	1.4 CITY-ST-ZIP	
TITLE	Vice President	2.1 TITLE	Change Addition
NAME	MARISOLA GARDINAS	2.2 NAME	
STREET ADDRESS	19650 NW 83 Ave	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33015	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: [Signature]

8/27/98

CR2E034 (5/98)



19650 NW 83 AV SUITE 1001

Miami Florida, 33015

Phone: (305) 829-23-72

Fax: (305) 829-23-72

MAY 28, 1998

TO: Florida Department Of State
Annual Report Filling Divisio Of Corp.

FROM: German Naranjo

P97000055574

Dear Sir or Madam:

This letter is to request an extention form, for my annual report filling of corporation. I did not received any forms prior to this letter, reason for my request of the annual form needed for continuance of business.

Enclose also find a check for the amount of \$150.00 made out to The Florida Department of ~~Revenue~~ ^{State}, as requested by your office. If you need additional information please write me at the address above or fax me to (305) 829 - 2372.

Thank you very much for your attention to this matter.

Best regards,


German Naranjo