

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).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000066511 (1)

1. Corporation Name

WORLD WIDE LEASING AND FINANCIAL GROUP INC.

Principal Place of Business

101 NORTH RIVERSIDE DRIVE, SUITE 206
POMPANO BEACH FL 33062

Mailing Address

101 NORTH RIVERSIDE DRIVE, SUITE 206
POMPANO BEACH FL 33062

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1997

4. FEI Number

65-0781720

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

LODATO, JOHN
820 LAVERS CIRCLE, G-209
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1505, 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 John Lodato

(Sign above, below or print name of registered agent and file if applicable)

(NOTE: Registered Agent signature required when temporary)

DAR

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

5.5 TITLE ☐ Change ☐ Addition

5.6 NAME

5.7 STREET ADDRESS

5.8 CITY-STATE-ZIP

5.9 TITLE ☐ Change ☐ Addition

5.10 NAME

5.11 STREET ADDRESS

5.12 CITY-STATE-ZIP

5.13 TITLE ☐ Change ☐ Addition

5.14 NAME

5.15 STREET ADDRESS

5.16 CITY-STATE-ZIP

5.17 TITLE ☐ Change ☐ Addition

5.18 NAME

5.19 STREET ADDRESS

5.20 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(ii), Florida Statutes. I further certify that the information included 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 explanation.

SIGNATURE: John Lodato

REQUIRED

7/2/98 561-279-2330

APPROVED
AND
FILED

98 OCT 29 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



0074601

CP21E034 (5/98)