Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90083 006 \*\*\*150.00

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## 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 # P97000107980

1. Corporation Name

NET WORLD TECHNOLGIES, INC.

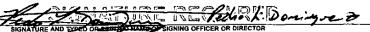
Principal Place	e of Business	Mailing Address				• • • • • • • • • • • • • • • • • • • •		
5290 SW 89TH AVE 5290 SW 89TH AVE								
COOPER CITY FL 33328		COOPER CITY FL 3	3328	DO NOT WE	DO NOT WRITE IN THIS SPACE			
US		US			Date Incorporated or Qualifect			
	•				12/24/1997			1
2 Principal Pl	ace of Rusiness	2a. Mailing Addres	s		4. FEI Number		IdV	plied For
<u></u>		26	¬ -		65-0809587		Not Applicable	
21 Suite, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75 A	dditional
22 27					5. Certifcate of Status Desired		Fee Red	quired
City & State City & State			<del></del>		6. Election Campaign Financing		\$5.00	May Be
28		28	s l		Trust Fund Contribution	'	Added to	o Fees
Zip	Zip Country Zip		Cou	ntry	8. This corporation owes the cu	rrent year In		
24			30	Personal Property Tax.		☐ Yes ☐ No		
	9. Name and Address of Curi	rent Registered Agent			10. Name and Address of New	Registered	Agent	
	100 110			81 Name				
	IGS, INC.		82 Street Ado		dress (P.O. Box Number is Not Accept	table)	-	
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132								
rı. L	AUDERDALE FL 33311-4132			83				ĺ
				84 City	The second secon		85 Zip C	ode
						FL		وها <sup>ي.</sup> - احد <del>د د د د د</del>
_20	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	to of Florida Such change	i was alimonized	ny the comora	rporation subrois this statement for the tion's board of directors. I hereby according	e purpose of ept the appo	r cnanging its i intment as rec	registered jistered
SIGNATURE								
	Signature, typed or printed name of registered			Agent signature requ	ired when reinstating)  ADDITIONS/CHANGES TO O	DATE SEICEDS AI	ND DIRECTO	PS IN 12
12.		AND DIRECTORS	<b>13.</b> ETE 1.1 TII	ne -	ADDITIONS/CHANGES TO C	-	☐ Change	Addition
TITLE	DOMINGUEZ BEDDO	<u> </u>	1.2 NA					_
NAME	DOMINGUEZ, PEDRO 5290 SW 89TH AVE			REET ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP_	COOPER CITY FL 33131	☐ DEL		ry-st-zip	·		Change	Addition
TITLE			2.2 NA	!				İ
NAME				REET ADDRESS				}
STREET ADDRESS				TY-ST-ZIP				
CITY-ST-ZIP TITLE		□ DEL					☐ Change	☐ Addition
NAME		<u></u>	3.2 N/		·			
STREET ADDRESS				REET ADORESS				\
	:	•	<b>₽</b>	TY-ST-ZIP	•			
CITY-ST-ZIP							☐ Change	☐ Addition
NAME			4, 2 N	AME				
STREET ADDRESS			4.3 \$1	REET ADDRESS				}
				TY-ST-ZIP				Ì
TITLE		☐ DEL					Change	☐ Addition
NAME			5.2 N	i i				-
STREET ADDRESS			5.3 ST	REET ADDRESS				}
CITY ST ZIP		<del>بنیهیر روستنون</del> وست	5.4 CI	TÝ-ST-ZIP	المراجع المتعارض المت			· <del>-</del>
TITLE		☐ DEL	ETE 6.1 TF	TLE			☐ Change	☐ Addition
NAME			6.2 N	ME				
A			6.3 \$1	REET ADDRESS				ļ

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP



305 824 2285