


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

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000109087 (1)

1. Corporation Name
RS WORLD TRADING, INC.

Principal Place of Business

9450 S.W. 72 ST. #100A
MIAMI FL 33173

Mailing Address

9450 S.W. 72 ST. #100A
MIAMI FL 33173



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	8306 Mills Drive	26	8306 Mills Drive	12/31/1997	
Suite, Apt. #, etc. #267		Suite, Apt. #, etc. #267		4. FEI Number	
22		27		65-0810099	
City & State Miami, Florida		City & State MIAMI, Florida		Applied For	
23		28		Not Applicable	
24	33183	25	USA	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Country		6. Election Campaign Financing	
29		30		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
29		30			

9. Name and Address of Current Registered Agent

SANTANA, REYNALDO
9450 S.W. 72 ST. #100A
MIAMI FL 33173

New Address →

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	8306 Mills Drive
84	#267
City	Miami, FL
85	Zip Code 33183

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	
1.1 TITLE		1.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
1.2 NAME		1.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
1.3 STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP	
2.1 TITLE		2.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
2.2 NAME		2.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
2.3 STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	
3.1 TITLE		3.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
3.2 NAME		3.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	
4.1 TITLE		4.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
4.2 NAME		4.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
5.2 NAME		5.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
6.2 NAME		6.2 NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
6.4 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:

MARISSA SANTANA 4/6/98 (305) 388-5633

CR2E034 (10/97)