AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000016181

**ESP WORLD CORPORATION** 

CITY-ST-ZIP

SIGNATURE:

59.35/65/5

**FILED** Jul 29, 1999 8:00 am Secretary of State

07-29-1999 90014 004 \*\*\*300.00

<u>a langunna, ura taran unuk taluk aaruk nabuk aaruk aaruk unuk unuk uraka urak uraka lalak unuk tangu tangu</u>

Principal Place	e of Business	Malling Address			1 100 100 110 1110 100 100 100 100 100	#10: 11010 B1161 110	10144 MA1 1981	
		POST OFFICE BOX 2546 JACKSONVILLE FL 32203			DO NOT WRITE IN T	HIS SPACE		
					3. Date Incorporated or Qualified 02/19/1998			7
2 Principal P	lace of Business	2a. Malling Address			4. EEI Number	A	pplied For	7
21		26			59.35/65/5		lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	Fee F	Additional Required	
City & Stat	te	City & State		مو عوليم ميد .	-6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	) May Be I to Fees	
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year		_	
24	25	29	30		Intangible Personal Property.		No	4
	9. Name and Address of Curren	t Registered Agent		94 1	10. Name and Address of New Register	red Agent		4
AME	RILAWYER			81 Nama A R	K T TERRIN	_		_
	ALMERIA AVENUE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	,		7
	AL GABLES FL 33134			83 450	<u>w 11" </u>			1
30				65				╛
	•			84 City Ta	e V a mille		Code 206	
11. Pursuant	to the provisions of sections 607.0502	and 607.1509. Florida Statute	s. the ab	ove named corpo	ration submits this statement for the purpose of	of changing its r	egistered	1
office or	registered agent, or both, in the State	of Florida. Such change was a	authorize	d by the corporati	on's board of directors. I hereby accept the ap	ppointment as r	egistered	
SIGNATURE	arri rarristar widi, and adaptive confi	1,0000.100 1100008 ,10 61000	JAMES CILL		7.2	2.99		1
SIGNATURE	Signature, typed or printed name of highered agent			red Agent signature req		·-		-  €
12.	OFFICERS AN	D DIRECTORS	13.	·····	ADDITIONS/CHANGES TO OFFICERS		$\overline{}$	R2E034 (5/99)
TITLE	PSTD	DELETE	1.1 70			Change	Addition	7
NAME	Kerrin, mark t		1.2 N/	WE				8
TOWNE	1							
STREET ADDRESS	3812 MONCRIEF ROAD			REET ADDRESS				18
STREET ADDRESS CITY-ST-ZIP	3812 MONCRIEF ROAD JACKSONVILLE FL 32209		1,4 C/	TY-ST-ZIP	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<del></del>		⊣ ∪
STREET ADDRESS		DELETE	1,4 CI 2.1 TII	TY-ST-ZIP		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP		DELETE	1,4 C/ 2,1 T/ 2,2 N/	TY-ST-ZIP TLE		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	1.4 CI 2.3 TII 2.2 NA 2.3 ST	TY-ST-ZIP TLE NME REET ADDRESS		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			1.4 CI 2.3 TH 2.2 NA 2.3 ST 2.4 CI	TY-ST-ZIP TRE MME REET ADDRESS TY-ST-ZIP				⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	1,4 Cr 2.5 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr	TV-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE		☐ Change	Addition Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			1,4 Cr 2.1 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr 3.2 NA	TYST-ZIP TILE MME REET ADDRESS TY-ST-ZIP TILE MME				⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			1.4 Cr 2.5 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr 3.2 NA 3.3 ST	TV-ST-ZIP TILE AMME REET ADDRESS TV-ST-ZIP TILE AMME REET ADDRESS				⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		DELETE	1.4 Cr 2.5 Tr 2.2 NA 2.3 ST 2.4 Cr 3.1 Tr 3.2 NA 3.3 ST 3.4 Cr	TYST-ZIP TTE AME REET ADDRESS TY-ST-ZIP TLE LIVE REET ADDRESS TY-ST-ZIP TY-ST-ZIP		Change	Addition	⊣ ∪
STREET ADDRESS CITY.ST-ZIP TITLE NAME STREET ADDRESS CITY.ST-ZIP TITLE NAME STREET ADDRESS CITY.ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE			1.4 Cr 2.5 TM 22 NA 23 ST 2.4 Cr 3.1 TM 32 NA 3.3 ST 3.4 Cr 4.1 TM	TV-ST-ZIP TILE AME TY-ST-ZIP TILE AME REET ADDRESS TY-ST-ZIP TILE TY-ST-ZIP TY-ST-ZIP TY-ST-ZIP TILE				⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME NAME		DELETE	2.1 TM 2.2 NM 2.2 ST 2.4 CM 3.1 TM 3.2 NM 3.3 ST 3.4 CM 4.1 TM 4.2 NM	TYST-ZIP TTE AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		DELETE	1.4 Cri Till 22 NA 23 ST 24 Cri Till 32 NA 3.3 ST 3.4 Cri Till 42 NA 4.3 ST	TYST-ZIP TTE AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE LE L		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DELETE	1.4 Cr 2.5 Tm 2.2 NA 2.3 ST 2.4 Cr 3.1 Tm 3.2 NA 3.3 ST 3.4 Cr 4.1 Tm 4.2 NA 4.3 ST 4.4 Cr	TYST-ZIP TE  AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE UME REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE TY-ST-ZIP TY-ST-ZIP		☐ Change	Addition Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	1.4 Cr 2.1 Tri 22 NA 2.3 ST 2.4 Cr 3.1 Tri 3.2 NA 3.3 ST 3.4 Cr 4.1 Tri 4.2 NA 4.3 ST 4.4 Cr 5.1 Tri	TYST-ZIP TTE AME REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE UME REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE		Change	Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DELETE	1.4 C/C 2.5 TIT 2.2 NA 2.3 ST 2.4 C/C 3.1 TIT 3.2 NA 4.1 TIT 4.2 NA 4.3 ST 4.4 C/C 5.1 TIT 5.2 NA	TYST-ZIP TIE  AME REET ADDRESS TY-ST-ZIP TIE  REET ADDRESS TY-ST-ZIP TILE UME REET ADDRESS TY-ST-ZIP TILE UME REET ADDRESS TY-ST-ZIP TILE UME		☐ Change	Addition Addition	⊣ ∪
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		□ DELETE	1.4 C/C 2.5 TTT 2.2 NA 2.3 ST 2.4 C/C 3.3 TTT 3.2 NA 3.3 ST 4.4 C/C 5.1 TTT 5.2 NA 5.3 STI	TYST-ZIP TE  AME REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE THE THE THE THE THE THE THE THE THE TH		☐ Change	Addition Addition	⊣ ∪
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DELETE	1.4 Cr 2.5 TTT 2.2 NA 2.3 ST 2.4 Cr 3.1 TTT 3.2 NA 3.3 STT 4.4 Cr 5.1 TTT 5.2 NA 5.3 STT 6.4 Cr	TYST-ZIP TTE AME REET ADDRESS TY-ST-ZIP TLE WEET ADDRESS TY-ST-ZIP TLE		Change	Addition Addition	⊣ ∪

6.4 CITY-ST-2IP

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 rain address.