

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

FILED
Jun 07, 1999 8:00 am
Secretary of State

06-07-1999 90016 043 ***550.00

DOCUMENT # P98000023698

1. Corporation Name
WACKY WORLD, INC.



Principal Place of Business

5001 COLLINS AVENUE
#15-F
MIAMI BEACH FL 33140

Mailing Address

5001 COLLINS AVENUE
#15-F
MIAMI BEACH FL 33140

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/12/1998

4. FEI Number

65-0823604

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 the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

LESER, LIOR
5001 COLLINS AVENUE
#15-F
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81. Name

LIOR LESER

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

11028 NW 43 terrace

83.

84. City

Miami

FL

85. Zip Code

33178

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)

5/1/99

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	LESER, TIVA	
STREET ADDRESS	5001 COLLINS AVENUE, #15F	
CITY-ST-ZIP	MIAMI BEACH FL 33140	
TITLE	D	DELETE
NAME	LESER, LIOR	
STREET ADDRESS	5001 COLLINS AVENUE, #15F	
CITY-ST-ZIP	MIAMI BEACH FL 33140	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	Change	Addition
1.2 NAME	LESER, TIVA		
1.3 STREET ADDRESS	11028 NW 43 terrace		
1.4 CITY-ST-ZIP	Miami, FL 33178		
2.1 TITLE	D	Change	Addition
2.2 NAME	LESER, LIOR		
2.3 STREET ADDRESS	11028 NW 43 terrace		
2.4 CITY-ST-ZIP	Miami, FL 33178		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/99

305-461-8282

Daytime Phone #

CR2E034 (11/98)