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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000033276

ABC WORLD WIDE REALTY, INC.

Principal Place of Business

Mailing Address

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90186 012 ***150.00



3238 LANTANA		3238 LANTANA RD.								
LANTANA FL 33462 LANTANA FL 33462						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporate	d or Qualifed			
		T	,			04/09/1998 4. FEI Number				alled Fee
2. Principal Place of Business 2a. Mailing Address					2	4. FEI Number	534:	2001	1	plied For
21 2000 71				Kar	~~	65-0	> 9 7 3	20/		t Applicable
Suite, Apt. #/s/c Suite, Apt. #/s/c 27 20 4					·	5. Certifcate of Sta	us Desired	. 🗆	\$8.75 / Fee Re	equired
City & State City & State City & State 28 Styppful			10 9	U.	,	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
24 33462 25 Jalm Back 29 35462 30					ac	8. This corporation Personal Proper		rent year Int	angible □Yes	□No
9. Name and Address of Current Registered Agent						10. Name and Add	ess of New	Registered .	Agent	
								•		
AUTEN, STAN				Street	Addros	s.(P.O. Box Number	is Not Arrent	able) a		
3238 LANTANA RD.				Street		XINSO 11	1) La	il		1
LANTANA FL 33462				L	٠	2016				
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11. Pursuant	to the provisions of Sections 607.0502	he abov	e-napried	corpor	ation submits this sta	tement for the	purpose of	changing its	registered	
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					equired w			DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHA	NGES TO OF	FICERS AN		
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NAME			6.2 NAME					•		
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CITY-ST-ZIP		1	6.4 CITY-5	T-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:

EARD TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99

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