

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
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

**FILED**  
**Jul 13, 1999 8:00 am**  
**Secretary of State**

07-13-1999 90011 046 \*\*\*150.00

DOCUMENT # **P98000054641**

1. Corporation Name

**FALCON WORLDWIDE CORP.**



Principal Place of Business

28 N. 29TH AVENUE  
HOLLYWOOD FL 33020

Mailing Address

4028 N. 29TH AVENUE  
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/16/1998**

4. FEI Number

**65 086 3510**

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.

☐ Yes

☐ No

Principal Place of Business

**3812 N. 29 Ave**

2a. Mailing Address

**26 3812 N. 29TH AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Hollywood FL**

City & State

**28 HOLLYWOOD, FL**

Zip

**33020**

Country

**25 USA**

Zip

**29 33020**

Country

**30 USA**

9. Name and Address of Current Registered Agent

**MION, ROBERT**  
**4028 N. 29TH AVENUE**  
**HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

1. 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

LE **PD** ☐ DELETE

WE **MAOLI, THOMAS**  
REET ADDRESS **54 LAWRWENCE RD.**  
Y-ST-ZIP **RANDOLPH NJ 07869**

LE **VPD** ☐ DELETE

WE **MION, ROBERT**  
REET ADDRESS **5357 NW 58 TERRACE**  
Y-ST-ZIP **CORAL SPRINGS FL 33067**

LE ☐ DELETE

WE ☐ DELETE

REET ADDRESS ☐ DELETE

Y-ST-ZIP ☐ DELETE

LE ☐ DELETE

WE ☐ DELETE

REET ADDRESS ☐ DELETE

Y-ST-ZIP ☐ DELETE

LE ☐ DELETE

WE ☐ DELETE

REET ADDRESS ☐ DELETE

Y-ST-ZIP ☐ DELETE

LE ☐ DELETE

WE ☐ DELETE

REET ADDRESS ☐ DELETE

Y-ST-ZIP ☐ DELETE

LE ☐ DELETE

WE ☐ DELETE

REET ADDRESS ☐ DELETE

Y-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

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:

**SIGNATURE REQUIRED**

**7/14/99**

**954929 4559**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)



Logistical Transportation Solutions

Ground • Air • Ocean

3812 North 29th Avenue  
Hollywood, Florida 33020

Tele: (954) 929-4559

Fax: (954) 929-3354

24 Hour / 7 Day Service

pg 80000546 41  
587268-90011-46

July 6, 1999

Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

I would like to formally request a waive of the \$550.00 Second Notice Fee due to the fact that the first notice was never received, due to an incorrect address on document papers. We assume it was lost in the mail, as have been other items, since our location has been changed.

I am enclosing the original fee. If I can be of any further assistance, please feel free to contact me directly at (954) 927-0722.

Sincerely Yours,

Robert Mion  
Vice President  
Falcon Worldwide Corp.