2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

$\mathbf{FIL}\mathbf{ED}$ DOCUMENT # P99000101338 Feb 08, 2000 8:00 am 1. Entity Name Secretary of State WMI WORLD MANAGEMENT, INC. 02-08-2000 90044 046 ***150.00 Mailing Address Principal Place of Business 11380 PROSPERITY FARMS ROAD. STE 217 11380 PROSPERITY FARMS ROAD, STE 217 PALM BEACH GARDENS FL 33410-3465 PALM BEACH GARDENS FL 33410 111999 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 65-0965761 Applied For City & State 4. FEI Number City & State Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7...Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THIEMANN, DIETER A Street Address (P.O. Box Number is Not Acceptable) 11380 PROSPERITY FARMS ROAD, STE 217 PALM BEACH GARDENS FL 33410 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. □ Change Addition TITLE ☐ Delete WEIGL, HERBERT NAME NAME 11380 PROSPERITY FARMS ROAD, STE 217 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 Addition TREASURER Change ☐ Delete TITLE A. THIRMANN NAME DIETER NAME 11380 PROSPERITY FARMS RD. 217 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 CITY-ST-ZIP CITY-ST-7IP TITLE --☐ Delete TITLE KONRAD HIEMER FARMS RD 217 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP BEACH GARDENS FL 33410 CITY-ST-ZIP SECRETARY TITLE ☐ Delete TITLE ALFRED SPORRER NAME 11380 PROSPERITY FARMS RD 217 STREET ADDRESS STREET ADDRESS MEACH GARDENS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 report or supplied entail 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.