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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CUMENT #

FILED Jan 15 1998 8:00am Secretary of State

1. Corporation	WORLD II, INC.				
Principal Place of Business 8059 UNIVERSITY ORIVE CORAL SPRINGS FL 33071		Mailing Address 2059 UNIVERSITY DRIVE CORAL SPRINGS FL 33071			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 11/18/1991	
2. Principal Place of Business		2a. Mailing Address	A	4. FEI Number	Applied for
21		26		65-0295128	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	F . v	e Herian Casarina Linasia	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	Personal Property Tax due June 30.	X Yes □ No □
<u> </u>	9, Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Registered	Agent
	SHAPIRO, KENNETH W.		81 Name		
	188 E. LAS OLAS BLVD F200		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	ORT LAUDERDALE FL 33301		83		
,	OTH ENOUGHDALE PE 00001				
			84 City	FL	85 Zip Code
11. Pursuant office or agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the ob-	9502 and 607, 1508, Florida Statu ale of Florida Such change was digalions of, Section 607,0505, F	ites, the above-named corp authorized by the corporal lorida Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	of changing its registered pointment as registered
SIGNATURE	Signature typed or printed name of registered	agest and the diar plicable (NO	II. Registered Agent signature requi	(cd when reassaing) DAII	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	11100		Change Addition
NAME	GENDAL, MARK A.		1.2 NAME		
STREET ADDRESS	2059 UNIVERSITY DR		1.3 STRIFT ADDRESS		
CITY-ST-ZIP TITLE	CORAL SPRINGS FL D	DELDE	1.4 CHY-S1-7IF		
NAME	REISCH, JEFFREY E.		2.1 T/TLE		Change Addition
STREET ADDRESS	2059 UNIVERSITY DR		2.2 NAME		
CITY-ST-ZIP	CORAL SPRINGS FL		2 3 STREET ADDRESS 2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STHEET ADDRESS		:
CITY-ST-ZIP			3.4 CHY+ST+ZIP		
TITLE		DELFTE	4 1 TILE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DITELE	4.4 C(1Y+S1+Z)P		
NAME		ב, ן אוונונ	5.1 10Lf		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ACCORESS		
CITY-ST-ZIP			5.4 CITY - ST- 7IP		
TITLE		DELETE.	61 11111		Change Addition
NAME			6.2 NAML		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CHY+ S1+ ZIP		

Thereby 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 ginual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or they report or trustee explowered 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 attrict ment with an address