

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S98757**
1. Corporation Name
WORLD INVESTORS & TRADERS, Inc.

Principal Place of Business Mailing Address
238 N. Westmonte DR. SUITE 280 ALTAMONTE Springs, FL 32714 SAME

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		3a. Date of Last Report	
21		26		59-3098894		12/1991	
22		27		5. Certificate of Status Desired		Applied For	
23		28		<input type="checkbox"/>		Not Applicable	
24		29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

\$8.75 Additional Fee Required
\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name	Louis Geys	
82	Street Address (P.O. Box Number is Not Acceptable)	238 N. Westmonte DR.	
83		Suite 280	
84	City	ALTAMONTE SPRINGS FL	85 Zip Code 32714

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]* (Date: **4-15-96**)

12. OFFICERS AND DIRECTORS	
TITLE	Louis Geys Director <input type="checkbox"/> DELETE
NAME	Louis Geys
STREET ADDRESS	238 N. Westmonte DR.
CITY-ST-ZIP	Suite 280 32714 ALTAMONTE Springs, FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	700001847037
5.4 CITY-ST-ZIP	-06/03/96--01017--011
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	***200.00
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]* **Louis Geys** 4-15-96 407-862-5511

CR2E034 (12/95)