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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 02 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V24931

(0)

TRANSWORLD INDUSTRIES, INC.

Principal Place of Business  100 \$. ORANGE AVE. \$TE. 300 ORLANDO FL 32801 US  2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State		Mailing Address  100 S. ORANGE AVE STE. 300 ORLANDO FL 32801-3211 US  2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State	100 S. ORANGE AVE STE. 300 ORLANDO FL 32801-3211 US  2a. Mailing Address 25 Suite, Apt. #, etc.		3. Date Incorporated or Qualified  03/27/1992  4. FEI Number  59-3115552  5. Certificate of Status Desired  6. Election Campaign Financing  3a. Date of Last Report  05/01/1996  Applied For  Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be		
23		28			Trust Fund Contribution		to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	Countr 30	У	This corporation has liability for Florida Statutes	intangible tax under Yes No	s. 199.032,
	9. Name and Address of Curre				10. Name and Address of New Re		
A.G.	C. CO.		8.	Name			
	SUN BANK CENTER		8	Street Add	dress (P.O. Box Number is Not Accepta	nie)	
200	SOUTH ORANGE AVE.						
ORL	ANDO FL 32801		8:	3			
			84	City		<b>85</b> Zip	Code
			ŀ			FL	
agent Lai SiGNATURE	ni familiar with, and accept the obli- Signal re, type for printed name of registeres a	gations of, Section 607.0505, Flo	orida Statute	9S.	rporation submits this statement for the ation's board of directors. I hereby accelulation and the statement for the ation's board of directors. I hereby accelulation and the statement for the statement for the ation and the statement for the sta	DATE	
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/OFFANGES TO OFFI	Change	Addition
NAME	DIMEGLIO, MICHAEL J.		1,2 NAME			CLI Change	
STREET ADDRESS	100 S. ORANGE AVE. STE. 3	00		T ADDRESS			
CITY-ST-ZIP	ORLANDO FL	••	1.4 CITY				
TITLE		☐ DELETE	2.1 TITLE			Change	Addition
NAMí			2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP		~~~	2. 4 CITY	- ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY- ST- ZIP		DECETE	3.4. CITY			□ Ok	f addition
TITLE NAME		בן הננונ	4.1 TITLE			L Change	Addition
STREET ADDRESS			4. 2 NAM				
				T ADORESS			
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NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP			5.4 CITY-	J			
Title		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	. [			
STREET ADORESS			6.3 STREE	ET ADDRESS			
CITY-ST ZIP			6.4 CiTY	ST-ZIP			<del></del>
informatio	by cernity that the information suppli in indicated on this annual report or	eo with this filing does not qualif supplemental annual report is tr	y for the ex rue and acc	emption state curate and the	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same leg	es, i further certify the all effect as if made u	it the nder oath; that