

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

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Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V48882 1. Corporation Name Trans World Invest, Inc.			
Principal Place of Business 3111 University Drive Suite 725-6 Coral Springs, Florida 33065		Mailing Address SAME	
2. Principal Place of Business 3011 N.E. 57th Court Suite, Apt. #, etc. City & State Fort Lauderdale, Fl. Zip 33308	2a. Mailing Address 3011 N.E. 57th Court Suite, Apt. #, etc. City & State Fort Lauderdale, Fl. Zip 33308	3. Date Incorporated or Qualified 7/8/92	3a. Date of Last Report 4/8/96
21. 3011 N.E. 57th Court Suite, Apt. #, etc. City & State Fort Lauderdale, Fl. Zip 33308	26. 3011 N.E. 57th Court Suite, Apt. #, etc. City & State Fort Lauderdale, Fl. Zip 33308	4. FEI Number 65-0658206	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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent Jeffrey W. Frantz 11900 Biscayne Boulevard Suite 408 North Miami, Florida 33181		10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City FL B5 Zip Code	
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, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE: _____			
12. OFFICERS AND DIRECTORS TITLE D/P ☐ DELETE NAME Ulrich Fleig STREET ADDRESS 3111 University Drive #725-6 CITY-ST-ZIP Coral Springs, Fl. 33065 TITLE D/S ☐ DELETE NAME Elard R. Schmidt STREET ADDRESS 3111 University Drive #725-6 CITY-ST-ZIP Coral Springs, Fl. 33065 TITLE D/T ☐ DELETE NAME Hans W. Wirth STREET ADDRESS 3111 University Drive #725-6 CITY-ST-ZIP Coral Springs, Fl. 33065 TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D/P ☒ Change ☐ Addition 1.2 NAME Ulrich Fleig 1.3 STREET ADDRESS 3011 N.E. 57th Court 1.4 CITY-ST-ZIP Fort Lauderdale, Fl. 33308 2.1 TITLE D/S ☒ Change ☐ Addition 2.2 NAME Elard R. Schmidt 2.3 STREET ADDRESS 3011 N.E. 57th Court 2.4 CITY-ST-ZIP Fort Lauderdale, Fl. 33308 3.1 TITLE D/T ☒ Change ☐ Addition 3.2 NAME Hans W. Wirth 3.3 STREET ADDRESS 3011 N.E. 57th Court 3.4 CITY-ST-ZIP Fort Lauderdale, Fl. 33308 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	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 checked, or on an attachment with an address.

SIGNATURE:  **Ulrich Fleig, President**  **954 351-0061**

CR2E034 (9/96)