PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name :



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90053 035 ***150.00

WORLDWIDE FIELD RESEARCH	1, INC.		
Principal Place of Business	Mailing Address		
7188 SW 103 CT CIR	7188 SW 103 CT CIR		
MIAMI FL 33173	MIAMI FL 33173		DO NOT WRITE IN THIS SPACE
U\$	US		3. Date Incorporated or Qualifed
			07/10/1992
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
	26		65-0350029 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	, <u>.</u>	\$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year Intangible
24 25	29	30	Personal Property Tax.
9. Name and Address of C			10. Name and Address of New Registered Agent
		81 Name	
ARANGO, RUTH		82 Street Add	ress (P.O. Box Number is Not Acceptable)
7188 SW 103 CT CIR			
MIAMI FL 33173		83	
19	:* ·	84 City	85 Zip Code
	77 0502 and 607 1509 Florida Statuta	e the shove named corr	poration submits this statement for the ournose of changing its registered
office or registered agent, or both, in the agent, I am familiar with, and accept the SIGNATURE Signature, typed or printed name of registers.	obligations of, Section 607.0505, Fior	nthorized by the corporation ida Statutes. Registered Agent signature require	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered ad when reinstating) DATE
12. OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE REPORT OF THE PARTY OF	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME ARANGO, RUTH		1.2 NAME	
STREET ADDRESS 7188 SW 103 CT CIR 🛴		1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		1.4 CITY+ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2. 4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	ļ
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>	3.4, CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	· ·
STREET ADDRESS		4.3 STREET ADDRESS	· ·
CITY-ST-ZIP		4.4 CITY+ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS	·	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ OELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	

14. 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 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, with all other like empowered.

6.4 CITY+ST-ZIP

SIGNATURE:

CITY-ST-ZIP