FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # SERAPE N.V. INC. Principal Place of Business Mailing Address LOEB. BLOCK & WACKSMAN LOEB. BLOCK & WACKSMAN 505 PARK AVE. SUITE 900 NEW YORK NY 10022 505 PARK AVE. SUITE 900 NEW YORK NY 10022 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/03/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Loeb, Block & Partners LLP 26 Loeb, Block & Partners LLP 98-0036543 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 505 Park Avenue 9th Floor 505 Park Avenue 9th Floor City & State 6. Election Campaign Financing New York, NY New York, NY Trust Fund Contribution Zip Country Country 8. This corporation owes or has paid the current year Intangible 10022 10022 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ATLANTIC WESTERN ASSET MANAGEMENT 3175 SOUTH CONGRESS AVE 82 Street Address (P.O. Box Number is Not Acceptable) 208

FILED Mar 24 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

PALM SPRINGS FL 33461			83	1		
			84	City	FL 85 Zip Co	de
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 profed name of regetiered agent and title if applicable (NOTE: Registered Agent signature regured when reinstating) DATE						
Signature typed or printed runner of regelered agent and title if applicable (NOTE: Registered 12. OF LICERS AND DIRECTORS 13.				ent signatur	a required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	D'		.1 THILE			Addition
NAME	VON DER GOLTZ, H. J.		2 NAME			
STREET ADDRESS	15757 S DIXIE HWY			T ADDRESS		
CITY-ST-ZIP	MIAMI FL				·	
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NAME	VON DER GOLTZ,R.		2 NAME			
STREET ADDRESS	15757 S DIXIE HWY			T ADDRESS		
CITY-ST-ZIP	MIAMI FL		. 4 CITY-			
TITLE	DM		1 TOTLE	51-211	Change	Addition
NAME	TRUSTMAATSCHAPPIJ, N. V.		2 NAME			_
STREET ADDRESS	BY: SELZER, HERBERT M. PROXY HOLDE			T ADDRESS	•	
CITY-ST-ZIP	CURACAO, NETHERLANDS		.4 CITY-			
TITLE			.1 TITLE	0. 2.	Change	Addition
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TITLE		DELETE :	.1 TITLE		☐ Change	Addition
NAME			2 NAME			.
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CITY-ST-ZIP			4 CITY-	ST-ZIP		
TITLE		DELETE .	1 THTLE		☐ Change	Addition
NAME		1	2 NAME			
STREET ADDRESS			.3 STAEE	ADDRESS		1
CITY-ST-ZIP			4 CITY-			
14. 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 quotient 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 13 if changed, or on an attachment with an adolest.						

N.V. Trustmaatschappij