

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Barbara B. Withman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **855685** (4)
1. Corporation Name
NORTHVILLE N.V. (INC.)

Principal Place of Business Mailing Address
C/O BERNARD DE GENTILE
3500 NW 77TH CT.
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/03/1983** 3a. Date of Last Report **04/22/1994**
4. FEI Number **59-2454240** 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. 197.032, Florida Statutes Yes No

2. Principal Place of Business Mailing Address
21 State, Apt. # etc. 26 State, Apt. # etc.
22 City, Address 27 City & State
23 City, Address 28 City & State
24 City, Address 25 County 29 Zip 30 Country

9. Name and Address of Current Registered Agent
DE GENTILE, BERNARD
3500 N.W. 77TH COURT
MIAMI FL 33122

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number if Not Applicable)
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 certifies the 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

12. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------------------|
| NAME | D |
| NAME | DE GENTILE, BERNARD |
| STREET ADDRESS | 3500 N.W. 77TH COURT |
| CITY, STATE | MIAMI FL |
| NAME | D |
| NAME | DE GENTILE, HENRI PIERRE |
| STREET ADDRESS | 3500 N.W. 77TH COURT |
| CITY, STATE | MIAMI FL |
| NAME | |
| NAME | |
| STREET ADDRESS | |
| CITY, STATE | |
| NAME | |
| NAME | |
| STREET ADDRESS | |
| CITY, STATE | |
| NAME | |
| NAME | |
| STREET ADDRESS | |
| CITY, STATE | |

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE 12)

| | |
|-------------------|---|
| 11 NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | |
| 13 STREET ADDRESS | |
| 14 CITY, STATE | |
| 15 NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 16 NAME | |
| 17 STREET ADDRESS | |
| 18 CITY, STATE | |
| 19 NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 20 NAME | |
| 21 STREET ADDRESS | |
| 22 CITY, STATE | |
| 23 NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 24 NAME | |
| 25 STREET ADDRESS | |
| 26 CITY, STATE | |

14. I hereby certify that the information required with this filing is substantially true and correct, and that my signature shall have the same legal effect as if made in my own handwriting. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes, and that my name appears on the back of a check of payment of the filing fee.

SIGNATURE: *Bernard de Gentile*
ORIGINAL AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

(305) 574-0104