

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000003064 (1)**

1. Corporation Name

SPANISH WATER RESORT N.V. CORP



Principal Place of Business

15888 S.W. 95 AVE #124
MIAMI FL 33157

Mailing Address

15888 S.W. 95 AVE #124
MIAMI FL 33157

3. Date Incorporated or Qualified

06/26/1995

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

APPLIED FOR

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

LUNDELIUS, WALTER D SR
9946 NW 49 TER
MIAMI FL 33178

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

(If title Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

CV
WERNET, FRANCISCO
PALISIA WEG 62 - SAN NICOLAAS
ARUBA

DELETE

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
ISA, WILLIAM L
KAYA DRS OY SPROCK 62
CURACAO, N.A.

DELETE

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
HART, RICHARD N
KAYA PAILON 10
CURACAO, N.A.

DELETE

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

P
JESURUN, ARTURO J
92 KAYA GODETT - PO BOX 4011
CURACAO, N.A.

DELETE

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

S
SURIEL, FRANCISCO R
MAYA WEG - 12
CURACAO, N.A.

DELETE

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

T
GUATO, VIRGINIA
MAHAIWEG 11
CURACAO, N.A.

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME

13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME

23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME

33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME

43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME

53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME

63 STREET ADDRESS
64 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

900001804399
-05/02/96-01016-015
***200.00

CR2E034 (12/95)

5/1/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Walter D. Lundelius* DATE: 4/26/96 (305) 592-5822