2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9700005893 1. Entity Name				Secretary of State
MARTINAI	R HOLLAND, N.V.			04-11-2002 90676 036 ***150.00
Principal Place of Business 5550 GLADES ROAD SUITE 600 BOCA RATON FL 33431		Mailing Address 5550 GLADES ROAD SUITE 600 BOCA RATON FL 33431		
Principal Place of Business 3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & Stat	е .	City & State		4. FEI Number 13-3178313 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered Agent
-	RANCIS A ESQ.	en e	Name Street A	Address (P.O. Box Number is Not Acceptable) 520711
% Anania, Bandklayder & Blackwell, P.A. 100 S.E. Second Street, #3300				
MIAMI FL	33131		City	FL Zip Code
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Signature, typed or printed name of registered agent and tatle it applicable. (NOTE: Registered FILE NOW!!! FEE After May 1, 2002 Fee to Make Check Payable to De				550.00 Trust Fund Contribution Added to Fees
11.	OFFICERS AND D	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS	PC SCHRODER, JOHANN M HARTENLUSTLAAN 1A, 2061 HA BLOEMENDAAL	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VVC VERBERK, ARIE TJASKERMOLEN 10, 3352 XJ PAPENDRECHT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO △ Change
TITLE NAME STREET ADDRESS*	SD LOONEN, PETER L JOZEF ISRAELSLAAN: 52; 2182 LK HILLEGOM	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
	C RONALD VAN DE GEER 5550 GLADES RD #600 BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Robert de Fluiter P.O. Box 7507, 111826 Schipol Airport, Netherlands
TITLE NAME STREET ADDRESS CITY-ST-ZIP	^	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr. V.P.: General Manager
13. I hereby of indicated of the cor	on this report of symplemental report is t poration or the receiver or rulteelempoy	his filing does not qualify for the rue and acculate and that my severed to execute this report as the all other like empowered.	e exemption stat	ated in Section 119.07(3)(i), Florida Statutes, I further certify that the information have the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if