FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300005386 (8)

TIBEL P	PROPERTIES N.V.	(0)		A REGINE HAD PERSONALARIN BORN BORN BORN ERRA DURO DANCE BRA	111
Principal Plac	a of Rusiness	Mailing Address	788.1		
S ORION INVESTMENT & MANAGEMENT LTD. SORION INVESTMENT & WA			MANAGEMENT LTD.		
9000 SW 152N	ID ST 106	9000 SW 152ND ST 106		DO NOT WRITE IN THIS SPACE	
MIAMI FL 3315	96	MIAMI FL 33156 US		3. Date Incorporated or Qualified	
\ ~~		00		11/29/1993	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number Applied	For
21		26		59-225038 Not App	
Suite, Apt. #, etc		Suite, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Addition	
22		27		Fee Required	đ
City & State	e	City & State		6. Election Campaign Financing \$5.00 May I Trust Fund Contribution Added to Fee	
Zip	Country	7 _(p)	Country	8. This corporation owes or has paid the current year Intangib	
24	25	29	30	Personal Property Tax due June 30. Yes No	,.
h	9. Name and Address of Curr			10. Name and Address of New Registered Agent	
SAN	IZ, JOSEPH A		81 Name		
910	O S. DADELAND BLVD.		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	TE 1810		83		
MIA	MI FL 33158		65		
]			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05		stered		
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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or protect name of registered a	NO DIRECTORS (NOT	f. Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	D	DELETE	1.1 TITLE		Addition
NAME	CHIANTERA, VITO M		1.2 NAME		
STREET ADDRESS	9100 S. DADELAND BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	D	DFLETE	2.1 TITLE	☐ Change ☐ /	Addition
NAME	BROWN, B. MACKAY		2.2 NAME		
STREET ADDRESS	9100 S. DADELAND BLVD.		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE	D	☐ DÉLETE	3.1 TITLE	Change L	Addition
NAME	SANZ, JOSEPH A		3 2 NAME		
STREET ADDRESS	9100 S. DADELAND BLVD.		3 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	Doneste	3 4. CITY-ST-ZIP		Addition
THILE		☐ DELETE	4.1 TITLE	L. Change L. J.	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CiTY+ST-ZiP 5.1 TiTLE	☐ Change ☐ /	Addition
NAME		Final section in	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-SI-ZIP			5 4 CITY-SI-ZIP		
TITLE		DELETE	6.1 TITLE	Change	Addition
NAME			6.2 NAME		ĺ
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 arroual 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 of 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:

and arm

1/8/98

305-278-8 400

FILED

Feb 26 1998 8:00am

Secretary of State