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

*PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

571078

(5)

HOLLAND-AMERICA INVESTMENTS CORPORATION

Principal Place of Business Mailing Address					4 sental Arrit snaar sidit naan tali bent andst Atou bidit noori dieft				
F	906 BALD EAGLE DRIVE. SUITE 500 P. O. BOX ONE MARCO ISLAND FL 33937		P. O. BOX ONE MARCO ISLAND FL 33937 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/04/1978			
2.	Principal Place of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number Applied For			
21		26				59-1828815 Not Applica	ble		
22	Suite, Apt. #, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required			
23	City & State	City & Sta 28	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
24	Zip Country 25	Zip [29]				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XXNo			
	9. Name and Address of Curre	ent Registered Age	nl	10. Name and Address of New Registered Agent					
WOODWARD, CRAIG, R., ESQUIRE 606 BALD EAGLE DR., SUITE 500					Name				
ISLAND TOWER BUILDING				82	82 Street Address (P.O. Box Number is Not Acceptable)				
MARCO ISLAND FL 33937					 				
				84	City	FL 85 Zip Code			

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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, Typed or printed transc of registered egent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIRECTORS		13.	13. ADDITIONS/CHANGES TO OFF		S IN 12					
TITLE	٧	☐ DELE1E	1.1 TITLE		Change	☐ Addition					
NAME	KUPERUS, HARRY		1.2 NAME								
STREET ADDRESS	KONINGIN ASTRID BLVD. 36		1.3 STREET ADDRESS								
CHY-ST-ZIP	NOORDWIJK, NETHERLANDS		1.4 CITY-ST-ZIP								
Tetle	\$	DELETE	2 1 TITLE		Change	Addition					
NAME	KUPERUS, ADRIANA.		2.2 NAME								
STREET ADDRESS	KONINGIN ASTRID BLVD. 36		2.3 STREET ADDRESS								
CITY-\$1-2IP	NOORDWIJK, NETHERLANDS		2.4 CITY-ST-ZIP								
TITLE	P	DELETE	3.1 TITLE		Change	Addition					
NAME	KUPERUS, JERRY		3.2 NAME								
STREET ADDRESS	KONINGIN ASTRID BLVD. 36		3.3 STREET ADDRESS								
CITY-ST-ZIP	NOORDWIJK, NETHERLANDS		3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TOLE		Change	Addition					
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 CITY-ST-ZIP								
TITLE		DELETE	5.1 TITLE	,	☐ Change	Addition					
NAME			5.2 NAME	<u> </u>							
STREET ADDRESS			5.3 STREET ADDRESS								
CITY-ST-ZIP			5.4 CITY-ST-ZIP								
TITLE		DELETE	6.1 TITLE		☐ Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								
CITY-ST-ZIP			6.4 CITY - ST - ZIP								

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 ennual report or supplemental armual 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, in or an attachment with an address.

SIGNATURE

Jerry H. Kuperus

March 20, 1998

FILED

Apr 13 1998 8:00am

Secretary of State

R2E034 (10/97)