FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 18 PM 5:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **821755** **(6)**

1. Corporation Name
INDEVCO MANAGEMENT CORPORATION N.V.

Principal Place of Business	Mailing Address
10305 SW 26TH TERR MIAMI FL 33165	10305 SW 26TH TERR MIAMI FL 33165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/20/1968	05/01/1994

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

4. FEI Number
59-1217470
☐ 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

WILKOV, LAWRENCE
4510 FILMORE STREET
HOLLYWOOD FL 33012

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when mandatory

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	MACKAY, ALEXANDER	12 NAME		
STREET ADDRESS	311 LYTTON BLVD.	13 STREET ADDRESS		
CITY-ST-ZIP	TORONTO, CANADA	14 CITY-ST-ZIP		
TITLE	S	21 TITLE		☐ Change ☐ Addition
NAME	CLARK, PAUL F	22 NAME		
STREET ADDRESS	SHIRLEY STREET AND VICTORIA AVENUE	23 STREET ADDRESS		
CITY-ST-ZIP	NASSAU, BAHAMAS	24 CITY-ST-ZIP		
TITLE	~~D~~	31 TITLE		☐ Change ☐ Addition
NAME	~~SHIRLEY FRANK~~	32 NAME		
STREET ADDRESS	~~10 VICTORIA AVE~~	33 STREET ADDRESS		
CITY-ST-ZIP	~~NASSAU, BAHAMAS~~	34 CITY-ST-ZIP		
TITLE	P	41 TITLE		☐ Change ☐ Addition
NAME	WEBB, DONALD	42 NAME		
STREET ADDRESS	23 COUNTRY LANE	43 STREET ADDRESS		
CITY-ST-ZIP	WILLOWDALE, ONT CAN	44 CITY-ST-ZIP		
TITLE	V	51 TITLE		☐ Change ☐ Addition
NAME	WILKOV, LAWRENCE	52 NAME		
STREET ADDRESS	4410 FILMORE STREET	53 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	54 CITY-ST-ZIP		
TITLE	T	61 TITLE		☐ Change ☐ Addition
NAME	ALMIRALL, JORGE C	62 NAME		
STREET ADDRESS	10305 S W 26 TERRACE	63 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	64 CITY-ST-ZIP		

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)(i), 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: _____ 4/12/95
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0178042 CF