

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 # 838841 (5)

1. Corporation Name

HAMBURGER INTERNATIONALE RUCKVERSICHERUNG AKTIEN
GESELLSCHAFT CORP.



Principal Place of Business

3751 MAGUIRE BOULEVARD
SUITE 151
ORLANDO FL 32803

Mailing Address

3751 MAGUIRE BOULEVARD
SUITE 151
ORLANDO FL 32803

3. Date Incorporated or Qualified
07/27/1977

3a. Date of Last Report
06/14/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

59-1753535

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

10. Name and Address of New Registered Agent

EVANS, SHERMAN A
3751 MAGUIRE BLVD
STE 151
ORLANDO FL 32803

81 Name

Anita Lee Towner

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

Same

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

Anita Lee Towner, Office Manager

4/30/96

12. OFFICERS AND DIRECTORS

T HUTCHINSON, KENNETH A
3751 MAGUIRE BLVD #151
ORLANDO, FL 00000

P WALTHER, PAUL
3751 MAGUIRE BLVD #151
ORLANDO FL

D EILERS, WOLFGANG
STECKELHOERN 5
HAMBURG, GERMANY

C SOLL, REINER
STECKELHOERN 5
HAMBURG, GERMANY

SV EVANS, SHERMAN A
3751 MAGUIRE BLVD., #151
ORLANDO FL

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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:

Paul Walther, President

4/30/96

407-895-0288

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)