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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 846832

6832

NUMANA INVESTMENTS INC. N.V.

(4)

Secretary Of

FILED Mar 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1825 CORAL WAY 1825 CORAL WAY MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1980 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 52-1229113 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zφ 8. This corporation owes or has paid the current year Intangible Country ☐ No Personal Property Tax due June 30. Yes Yes 30 24 29 25 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 LUKACS, JOHN 1825 CORAL WAY Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** City 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. SIGNATURE Signature, typed or printed name of regulared agent and title if apply able (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change 1.1 TITLE TITLE LUKACS, JOHN NAME 1.2 NAME 1825 CORAL WAY STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY - ST - ZIP Change ■ Addition DELETE 2.1 TITLE TiTLE **CURAÇÃO CORP.COMPANY N.V** 22 NAME NAME HANDELSKADE 8 2.3 STREET ADDRESS STREET ADDRESS **CURACAO, NETH. ANTILLE** 2. 4 City - St - ZiP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TiTLE DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 annual report or supplemental amount 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 processor of the corporation or the processor of the corporation or the processor of the corporation of the processor of the processor of the corporation of the processor of the processor

SIGNATURE:

3/3/90

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