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Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 850075 (3)

1. Corporation Name
TEMAX CORPORATION N.V.



Principal Place of Business Mailing Address
23 PIETERMAAI 23 PIETERMAAI
CURACAO, NETHERLANDS. ANTILL CURACAO, NETHERLANDS. ANTILL
OC OC

3. Date Incorporated or Qualified 08/17/1981 3a. Date of Last Report 02/09/1996

2. Principal Place of Business 2a. Mailing Address
21 3 L.B. Smithplein 26 3 L.B. Smithplein
Suite, Apt #, etc. Suite, Apt #, etc.
22 P.O. Box 6 27 P.O. Box 6
City & State City & State
23 Willemstad 28 Willemstad
Zip Country Zip Country
24 25 Curacao 29 30 Curacao

4. FEI Number 98-0048978 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

JACOB, JAMES C
C/O JAMES JACOB & COMPANY, INC.
1200 W. PLATT ST., APT. 204
TAMPA FL 33606

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AIF <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEBAETS, MARIJN	1.2 NAME	
STREET ADDRESS	MOERSTRAAT 37	1.3 STREET ADDRESS	
CITY- ST- ZIP	9970 KAPRIJKE	1.4 CITY- ST- ZIP	
TITLE	MD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORPORATE AGENTS N.V.	2.2 NAME	
STREET ADDRESS	3, L.B. SMITHPLEIN	2.3 STREET ADDRESS	
CITY- ST- ZIP	CURACAO, NETHERLANDS	2.4 CITY- ST- ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACOB, JAMES C	3.2 NAME	
STREET ADDRESS	1200 W. PLATT ST., #204	3.3 STREET ADDRESS	
CITY- ST- ZIP	TAMPA FL 33606	3.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 incorporator or a duly 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: _____ By its managing director: Corporate Agents N.V.
Februari 17, 1997 (599-9) 623700
By: Gosse de Vries, _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone # 0529526

CR2E034 (9/96)