

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 850075

1. Entity Name

TEMAX CORPORATION N.V.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90239 031 ***550.00

Principal Place of Business

LB SMITHPLEIN
#3
WILLEMSTAD CURACAO

Mailing Address

LB SMITHPLEIN
#3
WILLEMSTAD CURACAO CU
US

2. Principal Place of Business

3. Mailing Address Willemstad, Curacao

L.B. Smithplein #3,

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

98-0048978

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. 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

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE AIF ☐ Delete
NAME DEBAETS, MARIJN
STREET ADDRESS MOOERSTRAAT 37
CITY-ST-ZIP 9970 KAPRIJKE

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MD ☐ Delete
NAME CORPORATE AGENTS N.V.
STREET ADDRESS 3, L.B. SMITHPLEIN
CITY-ST-ZIP CURACAO, NETHERLANDS

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JACOB, JAMES C
STREET ADDRESS 1200 W. PLATT ST., #204
CITY-ST-ZIP TAMPA FL 33606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Corporate Agents N.V., as man. dir. of Temax Corporation N.V. by: Zenda Edwards, Aug. 15, 2000 (5999)462370

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)