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Mar 20 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 # 850101

(7)

1. Corporation Name
FRENE N.V.

Principal Place of Business

PENTHOUSE
888 BRICKELL AVENUE
MIAMI FL 33131

Mailing Address

PENTHOUSE
888 BRICKELL AVENUE
MIAMI FL 33131-2913



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
200 S BISCAYNE BLVD
STE 4800
MIAMI FL 33131

3. Date Incorporated or Qualified
08/18/1981

3a. Date of Last Report
02/19/1996

4. FEI Number
59-2132572

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

10. Name and Address of New Registered Agent

81 Name M.F. Hassan

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

83 Penthouse

84 City Miami

FL 85 Zip Code 33131

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 not a director, officer, or shareholder of the corporation and I am not a partner in the corporation.

SIGNATURE

M.F. Hassan

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

101 NAME D MEZERHANE, NORA GOSEN DE
102 STREET ADDRESS 888 BRICKELL AVE.
103 CITY-STATE-ZIP MIAMI FL
104 TITLE AST
105 NAME MEZERHANE, FREDDY
106 STREET ADDRESS 888 BRICKELL AVE.
107 CITY-STATE-ZIP MIAMI FL
108 TITLE PST
109 NAME MEZERHANE, NELSON
110 STREET ADDRESS 888 BRICKELL AVE.
111 CITY-STATE-ZIP MIAMI
112 TITLE AIF
113 NAME HASSAN, MOSTAFA F
114 STREET ADDRESS 888 BRICKELL AVENUE
115 CITY-STATE-ZIP MIAMI FL 33131

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111 TITLE ☐ Change ☐ Addition
112 NAME
113 STREET ADDRESS
114 CITY-STATE-ZIP
21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP
41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP
51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP
61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that
I am a director or officer 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:

M.F. Hassan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-97

305-311-3001

CR2E034 (9/96)