## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

## **FILED** Feb 16 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name FRENE N.V. Principal Place of Business Mailing Address PENTHOUSE PENTHOUSE 888 BRICKELL AVENUE 888 BRICKELL AVENUE MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/18/1981 2. Principal Place of Business 2a. Mailing Address Applied For 59-2132572 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HASSAN, MF 888 BRICKELL AVE 82 Street Address (P.O. Box Number is Not Acceptable) **PENTHOUSE** 83 **MIAMI FL 33131** 84 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE\_flegistered Agent alguature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 5.1 T(T) F Change Addition MEZERHANE, NORA GOSEN DE NAME 1.2 NAME 888 BRICKELL AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DELE 16 Change ☐ Addition TITLE 2.1 TITLE NAME MEZERHANE, FREDDY 22 NAME STREET ADDRESS 888 BRICKELL AVE. 2 3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 City-St-ZiP PST DELETE Change Addition 3.1 TITLE TITLE MEZERHANE, NELSON NAME 3.2 NAME 888 BRICKELL AVE. STREET ADDRESS 3.3 STREET ADDRESS MAMI CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition HASSAN, MOSTAFA F NAME 4. 2 NAME 888 BRICKELL AVENUE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 4.4 CITY - ST-ZIP DELFTE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 attrictment with an address.

W. F. Hassan

61 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

Change

Addition