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

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

Apr 17 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # EHDEN N.V. Principal Place of Business Mailing Address C/O OWEN 8 FREED C/O OWEN \$ FREED 2200 MUSEUM TWR., 150 W. FLAGLER ST. 2200 MUSEUM TWR., 150 W. FLAGLER ST. DO NOT WRITE IN THIS SPACE MIAMI FL 33130 MIAMI FL 33130 3. Date Incorporated or Qualified 09/04/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 98-0049908 Not Applicable 26 Suite Apt #. etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FREED. OWEN S 2200 MUSEUM TOWER Street Address (P.O. Box Number is Not Acceptable) 150 W. FLAGLER ST. 83 **MIAMI FL 33130** 84 City Zip Code 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 Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETÉ Change Addition 1.1 Title TITEF FRANGIEH-SAYEGH, MICHEL 1.2 NAME NAME CALLE LUIS ROCHE NO. 30 STREET ADDRESS 1.3 STREET ADDRESS CARACAS VENEZUELA CITY-ST-ZIP 14 CITY-ST-ZIP DELETE ■ Addition TITLE 21 TITLE DE SAYEGH, YVONNE 2.2 NAME NAME CALLE LUIS ROCHE NO. 30 STREET ADDRESS 2.3 STREET ADDRESS CARACAS VENEZUELA CITY-ST-ZIP 2.4 City-St-ZiP DELETE Addition 3.1 TITLE Change FREED, OWEN 3.2 NAME 150 W. FLAGLER ST. #2200 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TIFLE 4.1 TITLE SAYEGH, FOUAD NAME 4. 2 NAME CALLE L ROCHE NO. 30 4.3 STREET ADDRESS STREET ADDRESS CARACAS VE CITY-ST-ZIP 4.4 City-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE

> 6.2 NAME 6.3 STREET ADDRESS

6.4 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 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 receiver or truesed empowered to recute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachmost with physical discounts.

FILED