FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

'95 MAY -1 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **850434** **(2)**

1. Corporation Name

WALDU INVESTMENTS N.V., INC.

Principal Place of Business	Mailing Address
% CARLOS C. LOPEZ-AGUIAR 1040 S. W. FIRST STREET MIAMI FL 33130	1040 SW FIRST STREET 1040 S. W. FIRST STREET MIAMI FL 33130 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/18/1981	3a. Date of Last Report: 04/27/1994
2. Principal Place of Business (21): 1036 S.W. 1 ST.	2a. Mailing Address (26):
Suite, Apt. #, etc (22):	Suite, Apt. #, etc (27):
City & State (23): MIAMI FLA.	City & State (28):
Zip (24): 33130 Country (25): US	Zip (29): Country (30):
4. FEI Number: 59-2087182	☐ 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 [illegible] for intangible tax under S. 193.022, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

FL ANNUAL REPORT SERVICE/CANTERA ASSO INC
1040 SW FIRST ST
MIAMI FL 33130

10. Name and Address of New Registered Agent

(91) Name: FLORIDA ANNUAL REPORT SERVICES INC.
(92) Street Address (P.O. Box Number is Not Acceptable): 1036 S.W. 1 ST.
(93)
(94) City: MIAMI FL (95) Zip Code: 33130

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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] MADA C. LOPEZ. PRES (NOTE: Registered Agent signature required when reinstating) DATE: 4/27/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	HUTTERLI, WALTER	12 NAME	800001474138
STREET ADDRESS	DISCOVERY POINT G.	13 STREET ADDRESS	-05/03/95--01153--011
CITY ST ZIP	GRAND CAYMAN, B.W.I.	14 CITY ST ZIP	****200.00 ****200.00
TITLE	EVD	21 TITLE	☐ Change ☐ Addition
NAME	VALDES, NICHOLAS ALDO	22 NAME	
STREET ADDRESS	20 NW 50TH AVE.	23 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	ARUBA MANAGEMENT CO. NV	32 NAME	
STREET ADDRESS	LLOYD G. SMITH BLVD. 66	33 STREET ADDRESS	
CITY ST ZIP	ORANJESTAD, ARUBA,NA	34 CITY ST ZIP	
TITLE	AS	41 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, AMADA C.	42 NAME	
STREET ADDRESS	1036 SW 1ST STREET	43 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	44 CITY ST ZIP	
TITLE	STD	51 TITLE	☐ Change ☐ Addition
NAME	DULITCHI, RUVIN	52 NAME	S/T/D. LOPEZ-CANTERA AMADA
STREET ADDRESS	20 NW 50TH AVE.	53 STREET ADDRESS	1036 S.W. 1st. STREET
CITY ST ZIP	MIAMI FL	54 CITY ST ZIP	MIAMI FLA. 33130
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	$225
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 14 above, or on an attachment with an address.

SIGNATURE: [signature] PRES/DIR/SEC. 4/27/95 305 595 8[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

WALTER HUTTERLI

01201147 CP