

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

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Mar 17 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 # 854499 (1)
1. Corporation Name
DELFA DEVELOPMENT N.V.



Principal Place of Business
390 NOR TH ORANGE AVENUE
SUITE 1300
ORLANDO FL 32801-9448

Mailing Address
390 NOR TH ORANGE AVENUE
SUITE 1300
ORLANDO FL 32801

3. Date Incorporated or Qualified
10/26/1982

3a. Date of Last Report
05/01/1996

4. FEI Number
52-1273342

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

2. Principal Place of Business
21 369 N. New York Avenue
Suite, Apt #, etc.
22 3rd Floor
City & State
23 Winter Park, FL
Zip
24 32789

2a. Mailing Address
26 369 N. New York Avenue
Suite, Apt #, etc.
27 3rd Floor
City & State
28 Winter Park, FL
Zip
29 32789

9. Name and Address of Current Registered Agent

BUILDER, J LINDSAY, JR
390 NORTH ORANGE AVEUE
SUITE 1300
ORLANDO 32801

10. Name and Address of New Registered Agent

81 Name
J. Lindsay Builder, Jr.
82 Street Address (P.O. Box Number is Not Acceptable)
369 N. New York Avenue
83 3rd Floor
84 City
Winter Park FL 85 Zip Code
32789

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

J. Lindsay Builder, Jr.

(NOTE: Registered Agent signature required when reinstating)

11/27/97

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SAMAWI, ANWAR
RUE DE L'HOPITAL CH 2001
NEUCHÂTEL, SWITZ.

1.2 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HASSAN, KHALED HAJ
4TH CIRCLE JABAL AMMAN
AMMAN, JORDAN

1.3 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CURACAO CORP COMPANY, NV
DE RUYTERKADE 62
CURACAO, N.A.

1.4 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

1.5 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

1.6 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Manager Director
Samawi, Anwar
179 rue de la Croix d'Or
5th Floor 1204 Geneva, Switzerland

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

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

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

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

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

14. I do 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 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 attachment with an address.

SIGNATURE:

Anwar Samawi
SIGNATURE (TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

3/11/97

Date

(513) 651-3700

Daytime Phone

0615880

CR2E034 (9/96)