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

PROFIT
CORPORATION
ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 854499

(1)

DELFA DEVELOPMENT N.V.

FILED Apr 16 1998 8:00am Secretary of State

Change

Change

Addition

Addition

Pr	incipal Plac	e of Busines	ss	Mailing Address					ı tanıdı sördi deter dinet ainen enten sate nibet nibet filbi dinet filbit filbit		
3	969 N NEW YORK AVE. SRD FLOOR WINTER PARK FL 32789 US			369 NO NEW YORK AVE. 3RD FL WINTER PARK FL 32789					DO NOT WRITE IN THIS SPACE		
1 2.1 11 = 1 = 11 1			US					3. Date Incorporated or Qualified			
L								- [	10/26/1982		
	Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For		
21				26					<b>52-1273342</b> Not Applicable		
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.	<del></del>				5. Certificate of Status Desired S8.75 Additional Fee Required		
_	City & State			City & State					6. Election Campaign Financing \$5.00 May Be		
23				28					Trust Fund Contribution Added to Fees		
	<b>Z</b> ip		Country	Zip	Co	ountry	/		8. This corporation owes or has paid the current year Intangible		
24		_	25	29	30				Personal Property Tax due June 30.  Yes No		
		9, Name	and Address of Current	Registered Agent					10. Name and Address of New Registered Agent		
	BUILDER, J. LINDSAY J 81 Name										
	369 NO NEW YORK AVE.						Ctroot	Addess	(D.C. Day Mysshav in Not Assessable)		
						82	SHEEL	et Address (P.O. Box Number is Not Acceptable)			
l				83							
	***	116111790	TE OFFOO								
						84	City		FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,						above	e-named	Corpora	visition submits this statement for the purpose of changing its registered		
١"	office or r	egistered ag	iont, or both, in the State o	of Florida. Such change was	authoriz	ed by	v the cor	poration	on's board of directors. I hereby accept the appointment as registered		
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, typoid or printed name of registered agent and title if applicable. (NOTE:						red Ane	ont signature	a required s	d when reinstating) DATE		
12	<del></del>		OFFICERS AND		13		on organization	e required r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TIT		Ď		☐ OELETE		TITLE		Ţ	☐ Change ☐ Addition		
1W	VIE	SAMAW	I, ANWAR		1.2	NAME			_ • •		
STREET ADDRESS 17 RUE DE LA CROIX D'OR 51			STH FL	1 FL 1.3							
1	Y-ST-ZIP	GENEVA				CITY-S					
TITI		D		DELET <b>e</b>		TITLE			Change Addition		
NAI	WE	HASSAN	i, khaled haj		2.2	NAME			— · —		
STF	REET ADDRESS		CLE JABAL AMMAN				ADDRESS				
CIT	Y-ST-ZIP		JORDAN			CITY-			, · · · · · · · ·		
TITL		D		DELET <b>E</b>		TITLE		<del> </del>	☐ Change ☐ Addition		
NA	ME	OURAC/	O CORP COMPANY,N	IV .	3.2	NAME					
STR	STREET ADDRESS DE RUYTERKADE 62			• •	3.3 STREET ADDRESS		ADDRESS				
_	CITY-ST-ZIP CURAÇÃO, N.A.				3.4. CITY-ST-ZIP						
TITI			,	DELETE	_	TITLE	<u> </u>	† <del>-</del>	Change Addition		
NA	1		1			NAME					
	EET ADDRESS						ADDRESS				

14. 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE