

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 20 AM 9:22

DOCUMENT # F93000002081 (8)

1. Corporation Name

MARIENPOLDER INVESTMENTS, N.V.

Principal Place of Business

Mailing Address

C/O MADISON H. COCKMAN, ATTORNEY AT LAW
915 MIDDLE RIVER DRIVE, #220
FT. LAUDERDALE FL 33304

C/O MADISON H. COCKMAN, ATTORNEY AT LAW
915 MIDDLE RIVER DRIVE, #220
FT. LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/04/1993

3a. Date of Last Report
01/27/1994

4. FEI Number
NOT APPLICABLE

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

7. This corporation has liability for intangible tax under § 199.055,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 c/o Donald B. Medalie

25 c/o Donald B. Medalie

Suite, Apt. #, etc

Suite, Apt. #, etc

22 1500 E. Atlantic Blvd;

27 1500 E. Atlantic Blvd;

City & State

City & State

23 Pompano Beach, FL

28 Pompano Beach, FL

24 33060

25 USA

29 33060

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COCKMAN, MADISON H ATTY.
915 MIDDLE RIVER DRIVE, #220
FT. LAUDERDALE FL 33304

81 Name

Donald B. Medalie

82 Street Address (P.O. Box Number is Not Acceptable)

1500 E. Atlantic Blvd., Suite C

83

84 City

Pompano Beach

FL

85 Zip Code

33060

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 obligation of Section 607.0505, Florida Statutes.

SIGNATURE *Donald B. Medalie* DONALD B. MEDALIE

6-12-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
CD
PIERETTI, CHRISTINA MRS.
CENTRO EMPRESARIAL POLAR
CARACAS, VENEZUELA

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP
CD
Pieretti, Cristina Mrs.
P.O. Box 20351-A San Martin 1020A
Caracas, Venezuela

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
VCD
CORPORATE TRUST, N.V.
CURACAO, 17, CHUCHUBWEG
NETHERLANDS ANTILLES

15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY ST ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY ST ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY ST ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY ST ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP
Change Addition

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 110.07(3)(b), 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:

Christina Pieretti

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-95

00582-2853522

00582-914980