

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002240

1. Corporation Name

SYLVANIA EXPORT CORPORATION N.V.

Principal Place of Business

6600 N. ANDREWS AVE., SUITE 240
FT. LAUDERDALE FL 33309

Mailing Address

6600 N. ANDREWS AVE., SUITE 240
FT. LAUDERDALE FL 33309

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90034 024 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1993

4. FEI Number

65-0405576

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

LINDEN, JEFFREY M
6600 N. ANDREWS AVE., SUITE 240
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☒ DELETE

NAME SCOLAR, NORMAN
STREET ADDRESS ASHGREEN, LADYTHORN CRESCENT, BRAMHALL
CITY-ST-ZIP CHESHIRE, ENGLAND

TITLE VC ☒ DELETE

NAME BARTLETT, EDWARD
STREET ADDRESS LITTLE HOME, ELLIS ROAD, CROWTHORNE
CITY-ST-ZIP BERKS, ENGLAND

TITLE D ☒ DELETE

NAME SWAANEN, MARINUS
STREET ADDRESS 34 CHEMIN DE PONT-CEARD
CITY-ST-ZIP CH1290 VERSOIZ SW

TITLE D ☐ DELETE

NAME EQUITY TRUST (CURACAO) N.V.
STREET ADDRESS SCARLOOWEG 81
CITY-ST-ZIP CURACO NE

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

12 NAME JEFFREY MICHAEL LINDEN
13 STREET ADDRESS 111 NW 104 TERRACE
14 CITY-ST-ZIP CORAL SPRINGS, FL 33071 U.S.A.

2.1 TITLE D ☐ Change ☒ Addition

22 NAME CARLOS JOHN PIETRI
23 STREET ADDRESS 5570 NW 44 STREET, APT. A103
2.4 CITY-ST-ZIP LAUDERHILL, FL 33319 U.S.A.

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME ROBERT JOSEPH MANCINI
3.3 STREET ADDRESS 7 OLD TOWN ROAD
3.4 CITY-ST-ZIP NORTH WALPOLE, MA 02081 U.S.A.

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 redeiver 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/99 954-776-1606

Date

Daytime Phone #

0288808

CR25E034 (11/98)