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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

-- ITALIJA KIR 1980. LIKI ORIK ORIK ARKI 1880. ISAN INDA KIRA KIRA KIRA INDA 1880. LIKI 1880.

Secretary of State

41-75-265 51 99 Daytme Phone # 0529538

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003315 (9)

SOUTHERN SUNFOREST COMPANY N.V.

Principal Place of Business Mailing Address									
BEATA DOMUS ANSTALT P. O. BOX 777. FL - 9497 TRIESENBERG VIA SWITZERLAND BEATA DOMUS ANSTA P. O. BOX 777. FL - 9 VIA SWITZERLAND VIA SWITZERLAND			FL - 9497 TRIESENBERG						
					3. Date Incorporated or Qualified 07/12/1993 3a. Date of Last Report 06/24/1996			Report	
	Place of Business	2a. Mailing Address			4. FEI Number		/	Applied For	
21		26			NOT APPLICABLE			Not Applicable	
Suite, Apt #, etc. 27		Suite, Apl. #, etc.	·		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State City 23 28		City & State	ty & State		Election Campaign Financing Trust Fund Contribution	П	\$5.00 May Be Added to Fees		
Zip			Country 30		This corporation has liability for	intangible tax under s. 199.032,			
24					Florida Statutes Yes X No				
	9. Name and Address of Cur	rent Registered Agent		01 11	10. Name and Address of New F	legistered	Agent		
	EN, DAVID W			81 Name					
	EAST BALDWIN AVE. UNIAK SPRINGS FL 32433			82 Street A	Address (P.O. Box Number is Not Accept	able)			
DEI	SHEAT OF THIS OF E OFFICE			83					
				64 City		FL	85 Zip	p Code	
11. Pursuant	to the provisions of Sections 607 (0502 and 607 1508. Florida Stat	utes the ab	ove-named o	corporation submits this statement for the		changing	its registered	
agent La	am familiar with, and accept the of	ate of Florida. Such change was digations of, Section 607.0505, l	s authorize Florida Stat	d by the corporates.	corporation submits this statement for the oration's board of directors. I hereby acc	ept the app	ointment a	as registered	
SIGNATURE	Signature, typed or printed name of registered			i Agent signature r	required when reinstating)	DATE			
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND			
TITLE	DCP	LJ DELETE	1.1 10	- }			Change	e L Addilion	
NAME	EGGENBERGER, HANS BERGSTRASSE 389		1.2 NA						
STREET ADDRESS	FL-9497 TRIESENBERG			REET ADDRESS					
CITY-ST-Z-P	DS INIESENDENG	DELETE		TY-ST-ZIP			Change	e Addition	
TITLE		☐ pcffic	21 TF	- 1			Cuange	3 L] AQURIUI	
NAME	MASCETTI, MARC A BERGSTRASSE 389		2.2 N/	1					
STREET ADDRESS	FL-9497 TRIESENBERG			REET ADDRESS					
CITY - ST - ZIP TITLE	DT INICOCINDENG	DELETE	2. 4 C	ITY-ST-ZIP		<u></u>	Change	e Addition	
NAME	MEIER, HSG GERHARD	C) SCELE	3.2 NA				L.J. Ondrigo	, L Addition	
STREET ADDRESS	M 4 4 4 4 4 4 5 1 5 1 5 1 5 1 5 5 5 5 5 5		1	REET ADDRESS					
	FL-9490 VADUZ								
CITY+ST-ZIF TITLE	100000	DELETE	3.4. U	ITY-ST-ZIP			Change	e Addition	
NAME.			4. 2 N						
STREET ADDRESS			- 1	reet address					
CITY-ST-7/2			1	TY-ST-ZIP					
TITLE		DELETE	51 TI			==	Change	e Addition	
NAME		_	5.2 NA	1					
STREET ADDRESS				REET ADDRESS					
C!TY-ST-ZIP			- 1	TY-ST-21P					
TITLE		DELETE	6.1 Tr		**************************************		Change	e Addition	
NAME			62 N	ME 1					
STREET ADDRESS			6.3 ST	REET ADDRESS					
CITY-S1-2IP	1			TY-ST-ZIP					
14. I de here	by certify that the information supp	olied with this filing does not qui	alify for the	exemption st	ated in Section 119.07(3)(i), Florida Statu	tes I furthe	r certify th	at the	
Lam an d	officer or director of the corporation in Block 12 or Block 13 it changes	n or the receiver or trustee empa b, or on an attachment with an a	owered to e		that my signature shall have the same le eport as required by Chapter 607, Florida				
	POUT MENTER D A	INFORESTS COMPANY	. T 1 Y	sine to the					