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PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9500003064 (1)

SPANISH WATER RESORT N.V. CORP

Principal Place of Business Mailing Address 15888 S.W. 95 AVE #124 15888 S.W. 95 AVE #124 MIAMI FL 33157 MIAMI FL 33157-1851 3. Date Incorporated or Qualified Date of Last Report 06/26/1995 05/01/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For APPLIED FOR 21 Not Applicable 26 Suite Apt # etc Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country This corporation has liability for intengible tax under s. 199.032, Yes 🔲 No 25 Florida Statutes 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LUNDELIUS, WALTER D SR 81 Name 9946 NW 49 TER 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33178** 83 City Zip Code 85 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. Lam familiar with land accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if app NO1£: Registered Agent signature required when reinstating) OFFICERS AND DIRECT 96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELET 1.1 TITLE Change THE F WERNET, FRANCISCO 1.2 NAME Note PALISIA WEG 82 - SANNICOLAAS 1.3 STREET ADDRESS STREET ADDRESS ARUBA 1.4 CITY-ST-ZIP COTY-\$1-20 DELETE Change Addition TITLE 2.1 TITLE ISA. WILLIAM L 2.2 NAME KAYA DRS OY SPROCK 62 STREET ADDRESS 2.3 STREET ADDRESS CURAÇÃO, N.A. 2.4 CITY-ST-ZIP OIY \$1-75 DELETE Change Addition 1 11 # 3 1 TITLE HART, RICHARD N 32 NAME NAME KAYA PAPILON 10 STREET ADDRESS 3.3 STREET ADDRESS CURAÇÃO, N.A. 3.4. CITY-ST-ZIP CHY-ST-78 DELETE 41 TITLE TITLE JESURUN, ARTURO J 4. 2 NAME DAME 92 KAYA GODETT - PO BOX 4011 STREET ADDRESS 4.3 STREET ADDRESS CURACAO, N.A. 4.4 CITY-ST-ZIP CITY-ST-2IF DELETE Trite 51 TITLE SURIEL, FRANCISCO R NAME 5.2 NAME MAYA WEG - 12 STREET ADDRESS 5.3 STREET ADDRESS CURAÇÃO, N.A. CHTY - ST - ZiP 5.4 CITY-ST-ZIP DELETE 7000021809**87**anoe -05/16/97--01022--020 TITLE 6.1 TITLE **GUATO, VIRGINIA** NAME 62 NAME **MAHAAWEG 11** STREET ADDRESS. **6.3 STREET ADDRESS** ***165.00 CURACAO, N.A. $C(1) \cdot S^{\tau} \cdot Z(P)$ 6.4 CiTY-ST-ZIP

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 cooporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name

SIGNATURE:

appears in Block 12 or

I am an officer or director of the corporation or the receiver or trustee

FILED

May 08 1997 8:00am

Secretary of State