## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F9600001900 (7)

FOUNDATION INTERNATIONAL MEMBERSHIP SERVICES ADM INISTRATIONS, THE

**FILED** Sep 24 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					( 1001100 (110 10110 01111 02111 02111	0 prije 2 0 jili 00		#rir 88(0) 8811 (88)	
	VEEROTHAAT #4	ABRAHAM DE VES				ľ					
CURACAO NET	THERLANDS ANTILLES	CURACAO METHERLANDS ANTILLES					DO NOT WRITE IN THIS SPACE				
		2				3	Date Incorporated or Qualified			st Report	
						ļ	04/16/1996	1	-	,	
2. Principal P	lace of Business	2a. Mailing Addre	ss .			A 4	, FEI Number			Applied For	
21 VAN 1	ENGELENWEG 21A		NGELEN	WE	いると	A	98-0136014			Not Applicab	
Suite, Apt.	*.®ox 3335	Suite, Apt. #, 6 27 P.O. BOX	<sup>3335</sup>			5	, Certificate of Status Desired	$\square$	•	5 Additional Required	
City & State	AO NETHERLANDS	City & State		LA	 พอร		, Election Campaign Financing			<b>00</b> May Be	
Zip	Country	Zip	Co	À	MUS	EZ	Trust Fund Contribution			led to Fees	
24	25	29	30	Or ICI y	,	8	<ul> <li>This corporation owes or has p Personal Property Tax due June</li> </ul>	_	entyea ] Yes	No No	
<del></del>	g. Name and Address of Current F	4	[30]			10	Name and Address of New R				
		, <u> </u>		81	Name		·				
JOHNSO	ON, PAUL B			82	Ctroot A	Addross (	P.O. Box Number is Not Accepta	blo			
	ASHLEY DR., #1450			02	SUBBLA	Huuless (	P,O. Box Number is Not Accepta	มเษา			
	FL 33602			83	<del></del>						
	. 4			84	City				85	Zip Code	
	•			0~	City			FL	62	rih code	
11. Pursuant	to the provisions of Sections 617.0502 a	and 617.1508, Florida	Statutes, the a	bov	e-named o	corporation	on submits this statement for the	purpose of	changir	ng its registere	
onice or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such chang ons of, Section 617.0	e was authorize 503, Florida Sta	aa by itutes	y the corpo s.	oration's	board of directors. I hereby acce	pt the appo	nemtrik	t as registered	
SIGNATURE							····				
	Signature, typed or printed name of registered agent a OFFICERS AND I		(NOTE: Registere	ed Age	ant signature r			DATE CEDC AND	Dinec	TODO N. 40	
12.	DC OFFICERS AND E	DEL	13. ETE 1.1 T	ITI F	I	DC	ADDITIONS/CHANGES TO OFFI		Char		
NAME	LIGHT, JANET	<u> </u>		IAME	I.		TANET, VILLHOU		٠,,,,,	NO CONTRACTOR	
STREET ADDRESS	DOKWEG #19		1		. ADDOCCO	80.8	OK 3432	, k	1/4		
CITY-ST-ZIP	CURAÇÃO NETHERLANDS ANT	THES			ST-ZIP	CLEA	RWATER, PL 3375	5 <del>7</del> ''	77		
TITLE	OC .	DEL			, E	DC			Char	nge Additio	
NAME	RONNQUIST, EWA	_		AME			QUIST, EWA	,	1		
STREET ADDRESS	DOKWEG #19				ADDRESS	P.O.B	DX 1931	N	/A		
CITY-ST-ZIP	CURACAO NETHERLANDS ANT	ILLES					RWATER, FL 3335	J 10	17		
TITLE	D	DEL				DE		•	Chan	ige Additio	
NAME	COHEE, LISE L		3.2 N	AME			EILISE L.	A/A			
STREET ADDRESS	DOKWEG #19		3.3 \$	TREET			30x 2714	IN.	1		
CITY-ST-ZIP	CURAÇÃO NETHERLANDS ANT	ILLES			ST-ZIP	CLE	ARWATOR, FL 3?	4756			
TITLE	D	☐ DEL				DC_			elian	ige Additio	
NAME	FRASER, DEBORAH		4.21	NAME		FRAS	SER, DEBORAH	. 1	/A		
STREET ADDRESS	DOKWEG #19		4.3 S	TREET	ADDRESS	0.0	. BOX 456	$N_{i}$	//7		
CITY-ST-ZIP	CURACAO NETHERLANDS ANT	ILLES	4.4 0	ITY-S	IT-ZIP	cie	ARWATER, PL	33 <del>)</del> ſ	7		
TITLE		DEL!							Chan	ige 🔲 Additio	
NAME			5.2 N	IAME						.00	
STREET ADDRESS			5.3 S	TREET	ADDRESS					70011	
CITY-ST-ZIP			5.4 0	ITY-S	1- ZIP					17.69	
TITLE		DEL							Chan	ge 🔲 Additio	
NAME			6.2 N	IAME			50000230 -09/25/970111	387	5		
STREET ADDRESS			6.3 S	TREET	ADDRESS		-09/25/970111	1029	3		
CITY-ST-ZIP			6.4 0	tr-s	T - ZIP		***70.00				

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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.