

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sanders Northam
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F96000002297 (7)
 1. Corporation Name
PABEMA NAAMLOZE VENNOOTSCHAP



Principal Place of Business Mailing Address

**SLACHTHUISSTRAAT 71
 B-9100 SINT NIKLAAS
 BELGIUM**

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 B-9100 SINT NIKLAAS
 BELGIUM**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc 26 Suite, Apt. #, etc

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified
05/06/1996

4. FEI Number **APPLIED FOR** 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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**GEYS, LOUIS
 235 N WESTMONTE DR SUITE 200
 ALTAMONTE SPRINGS FL 32714**

375 DOUGLAS AVE. SUITE 2006

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]* DATE **4-15-98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DE WITTE, ERIC	
STREET ADDRESS	RODE DREEF 37, B-2970 SCHILDE	
CITY-ST-ZIP	BELGIUM	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VERSELE, MYRIAM	
STREET ADDRESS	RODE DREEF 37, B-2970 SCHILDE	
CITY-ST-ZIP	BELGIUM	
TITLE	VC	<input type="checkbox"/> DELETE
NAME	VERMEERSCH, EDGARD	
STREET ADDRESS	PONTSTRAAT 25, B-9831 SINT MARTENS LATAM	
CITY-ST-ZIP	BELGIUM	
TITLE	C	<input type="checkbox"/> DELETE
NAME	VERMEERSCH, PAUL	
STREET ADDRESS	LEERNESTEENWEG 315, B-9800 DEINZE	
CITY-ST-ZIP	BELGIUM	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	600002496044
5.3 STREET ADDRESS	-04/22/98--01011--035
5.4 CITY-ST-ZIP	***300.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

[Signatures]

CR2E034 (10/97)