SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Aug 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

 Corporatio 	MENT # F970000	004226 (3)			
	LTD. (CORPORATION)				
Principal Place	of Business	Mailing Address			Hili gjelg ligig rødeg blet here
EXPERCO PAR	renaires sa	EXPERCO PARTENAIRES	SA		
9. RUE VU VALAIS		9. RUE VU VALAIS		DO NOT WEITE IN THIS	60 400
1202, GENEVE, SWITZERLAND		1202, GENEVE. SWITZERLAND		DO NOT WRITE IN THIS SPACE 3, Date incorporated or Qualified	
				08/12/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip ~⊣	Country	Zip	Country	8. This corporation owes or has paid the curre	, , , , , , , , , , , , , , , , , , ,
4	9. Name and Address of Current I	29 Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered A	Yes No
DAL	ADINO, RICHARD ESQ.	wehieren when	81 Name	iv. Hume and Address of New Negistered A	W. C.
	S. FLAGLER DRIVE, #1330		DO 54	dence (D.O. Boy Number is Not Assessable)	
	T PALM BEACH FL 33401		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
****	matti waciwii i a woro i		83		
			84 City		85 Zip Code
			Oily	FL	Ba Zip Code
11. Pursuant	to the provisions of sections 607.0502 a	and 607.1508, Florida Statul	tes, the above-named corporate	oration submits this statement for the purpose of che	anging its registered
11. Pursuant office or agent. I :			tes, the above-named corpi authorized by the corporat lorida Statutes. 10TE Regisland Agent signature rec	oration submits this statement for the purpose of chation's board of directors. I hereby accept the appoin	anging its registered tment as registered
SIGNATURE	to the provisions of sections 607.0502 a registered agent, or both, in the State of arm familiar with, and accept the obligation Signature, typed or printed name of registered egent a OFFICERS AND	1) eldsupplication			<u>.</u>
SIGNATURE	Signature, typed or printed name of registered agent a OFFICERS AND	1) eldsupplication	NOTE: Registered Agent signature rec	rquired when reinstating) DATE	D DIRECTORS IN 12
SIGNATURE 12.	Signature, typed or printed name of registered agent a OFFICERS AND C FONJALLAZ, PAUL-ERIC	and title if applicable (f DIRECTORS	NOTE Registered Agent signature red	rquired when reinstating) DATE	D DIRECTORS IN 12
SIGNATURE 12. IITLE VAME	Signature, typed or printed name of registered agent a OFFICERS AND C FONJALLAZ, PAUL-ERIC EXPERCO PARTENAIRES SA/ 9,	and title if applicable (f DIRECTORS	NOTE Registered Agent signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	rquired when reinstating) DATE	D DIRECTORS IN 12
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T.L. 15 1998