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

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07 1998 8:00am
Secretary of State

DOCUMENT # **L12560** **(3)**

1. Corporation Name
ESTORIL DEVELOPMENT CORPORATION, INC.

Principal Place of Business
~~% JACQUES LI. DE BRUIJN~~
~~472 FIRST ST. WEST~~
~~TIERRA VERDE FL 33715~~

Mailing Address
~~% JACQUES LI. DE BRUIJN~~
~~472 FIRST ST. WEST~~
~~TIERRA VERDE FL 33715~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/30/1989

2. Principal Place of Business
21 L.O.F.F.I.M.
Suite, Apt. #, etc
22 472 1ST STR W.
City & State
23 TIERRA VERDE
Zip 24 33715
Country 25 FL

2a. Mailing Address
26 L.O.F.F.I.M.
Suite, Apt. #, etc.
27 472 1ST STR W.
City & State
28 TIERRA VERDE
Zip 29 33715
Country 30 FL

4. FEI Number: 59-2965880 — 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**
SWISHER, JOHN
669 1ST AVE N
ST PETERSBURG FL 33701

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: Type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PDTS	☑ DELETE
NAME	~~DE BRUIJN, JACQUES LI.~~	
STREET ADDRESS	~~472 FIRST ST. WEST~~	
CITY-ST-ZIP	~~TIERRA VERDE FL~~	
TITLE	D	☑ DELETE
NAME	PAY, WILL	
STREET ADDRESS	~~472 FIRST STREET WEST~~	
CITY-ST-ZIP	~~TIERRA VERDE FL~~	
TITLE	~~D~~	☑ DELETE
NAME	~~BOON, MARIO~~	
STREET ADDRESS	~~472 FIRST STREET WEST~~	
CITY-ST-ZIP	~~TIERRA VERDE FL~~	
TITLE	DVP /	☐ DELETE
NAME	DE BRUIJN, JOEP	
STREET ADDRESS	472 1ST ST W.	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE	1	☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	~~D~~	☑ Change ☐ Addition
2.2 NAME	~~WILL PAY~~	
2.3 STREET ADDRESS	~~669 1ST AVE N~~	
2.4 CITY-ST-ZIP	~~ST PETERSBURG FL 33701~~	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	PDT	☑ Change ☐ Addition
4.2 NAME	JOEP DE BRUIJN	
4.3 STREET ADDRESS	669 1ST AVE N.	
4.4 CITY-ST-ZIP	ST PETERSBURG FL. 33701	
5.1 TITLE	D.S	☐ Change ☑ Addition
5.2 NAME	BART DE BRUIJN	
5.3 STREET ADDRESS	669 1ST AVE N.	
5.4 CITY-ST-ZIP	ST PETERSBURG FL 33701	
6.1 TITLE	D.	☐ Change ☑ Addition
6.2 NAME	MARIA VERSTRAETEN.	
6.3 STREET ADDRESS	669 1ST AVE N.	
6.4 CITY-ST-ZIP	ST PETERSBURG FL 33701	

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.

SIGNATURE: Bart de Bruijn 04/28/98 (813) 906-0191

CR2E034 (10/97)