

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 24 AM 7:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P09595

(0)

1. Corporation Name

NESTLE PRODUCTS EXPORT CORPORATION

Principal Place of Business

PENINSULA REGISTERED AGENTS, INC.
200 S.E. FIRST STREET #110
MIAMI FL 33131

Mailing Address

PENINSULA REGISTERED AGENTS, INC.
200 S.E. FIRST STREET #110
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified

03/27/1986

3a. Date of Last Report

04/26/1994

4. FEI Number

59-2678197

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

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 200 S. Biscayne Blvd.

2a. Mailing Address

26 200 S. Biscayne Blvd.

Suite, Apt. #, etc.

22 # 4800

Suite, Apt. #, etc.

27 # 4800

City & State

23

City & State

28

Zip

24

County

25

Zip

29

County

30

9. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
PENTHOUSE, PENINSULA FEDERAL BLDG.
200 S.E. FIRST STREET
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
200 S. Biscayne Blvd.

83 # 4800

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE SV-
NAME FREI, ROLF
STREET ADDRESS CHURCHILL-ROOSEVELT HIGHWAY
CITY- ST- ZIP VALSAYN, TRINIDAD & TABAGO FL

TITLE AV-
NAME ESTEVEZ, MOISE
STREET ADDRESS 8350 NW 52ND TERRACE #201
CITY- ST- ZIP MIAMI FL

TITLE D
NAME DUPONT, A.
STREET ADDRESS CH-1814
CITY- ST- ZIP LA TOUR-DE-PEILZ, SWITZERLA

TITLE D
NAME GUELAT, ADRIEN
STREET ADDRESS 1, CH. DU TAXEROZ
CITY- ST- ZIP BLOMAY, SWITZERLAND

TITLE D
NAME DELAJOUX, H.
STREET ADDRESS CH-1814
CITY- ST- ZIP LA TOUR-DE-PEILZ, SWITZERLA

TITLE C
NAME HAAS, REINHOLD
STREET ADDRESS 17, CH. DE LA PROMESSE
CITY- ST- ZIP LA TOUR-DE-PEILZ, SW

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 ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

Yira Lugo

Yira Lugo

April 17/95 (305)593-0773

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Telephone Number)