

FROM: Atlantic-Distacor-Toledo

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P11378 1. Corporation Name ALTOCA INVESTMENTS N.V., INC.			
Principal Place of Business C/O MARK HAUSER, ESQ. 1111 KANE CONCOURSE (#616) BAY HARBOR ISLANDS FL 33154		Mailing Address C/O MARK HAUSER, ESQ. 1111 KANE CONCOURSE (#616) BAY HARBOR ISLANDS FL 33154	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		25. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 09/10/1986		4. FBT Number NOT APPLICABLE	
5. Certificate of Status Desired ☐		6. Election Campaign Financing Trust Fund Contribution ☐	
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No		8. 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	
9. Name and Address of Current Registered Agent HAUSER, MARC ESQ. 1111 KANE CONCOURSE (#616) BAY HARBOR ISLANDS FL 33154			
11. Pursuant to the provisions of Sections 607.0502 and 607.1408, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to 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 607.0908, Florida Statutes.			
SIGNATURE _____ (Signature, typed or printed name of registered agent and state's approval)			
12. OFFICERS AND DIRECTORS ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition	
TITLE PO NAME TOLEDANO, ALBERTO STREET ADDRESS GADILLAS A SAN JACINTO CITY, ST, ZIP CARACAS, VENEZUELA		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	
TITLE VO NAME DE TOLEDANO, ROSA STREET ADDRESS GADILLAS A SAN JACINTO CITY, ST, ZIP CARACAS, VENEZUELA		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	
TITLE STD NAME TOLEDANO, ABI STREET ADDRESS GADILLAS A SAN JACINTO CITY, ST, ZIP CARACAS, VENEZUELA		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP		6.1 TITLE 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)(f), 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, with all other like empowered.			
SIGNATURE: _____		SIGNATURE REQUIRED _____ 3/30/99	