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CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 18 AM 8:37

DOCUMENT # **P13741** **(4)**

1. Corporation Name
MIKEMIN CORPORATION N.V.

Principal Place of Business	Mailing Address
1221 BRICKELL AVENUE SUITE 1100 MIAMI FL 33131	1221 BRICKELL AVENUE SUITE 1100 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1987
3a. Date of Last Report: 03/29/1994

2. Principal Place of Business	2a. Mailing Address
21 10411 S.W. 108 AVE	26 10411 S.W. 108 AVE
Suite, Apt. #, etc. 22 D-250	Suite, Apt. #, etc. 27 D-250
City & State 23 MIAMI FL.	City & State 28 MIAMI, FL
Zip / Country 24 33176 / 25 USA	Zip / Country 29 33176 / 30 USA

4. FEI Number: 52-1397828 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

PEREZ, AIDA
GRANT THORNTON
1221 BRICKELL AVE #1100
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: ISABEL LARDIZABAL
82 Street Address (P.O. Box Number is Not Acceptable): 10411 S.W. 108 AVE. # D-250
83
84 City: MIAMI **FL** 85 Zip Code: 33176

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: Isabel Lardizabal — 3/1/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	DIAZ, SERGIO	12 NAME	
STREET ADDRESS	CENTRO COMERCIAL TAMANAC	13 STREET ADDRESS	
CITY ST ZIP	CARACAS1060,VENEZUEL	14 CITY ST ZIP	
TITLE	ST	21 TITLE	☐ Change ☐ Addition
NAME	DE DIAZ, MERCEDES PEREZ	22 NAME	
STREET ADDRESS	CENTRO COMERCIAL TAMANAC	23 STREET ADDRESS	
CITY ST ZIP	CARACAS1060,VENEZUEL	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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 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: ✓ Isabel Lardizabal — 3/1/95 — 305 5987324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0132083 CP