FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P35396 (1) PARKHOVEN B.V., INC. Principal Place of Business Mailing Address **166 LOOKOUT PLACE 166 LOOKOUT PLACE** STE 201 STE 201 MAITLAND FL 32751 DO NOT WRITE IN THIS SPACE MAITLAND FL 32751 3. Date Incorporated or Qualified 08/22/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 175 LOSEUT VLACE NOT APPLICABLE Not Applicable \$8.75 Additional SUITE ZO 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEERDAM, A. C. 166 LOOKOUT PL, STE 201 Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 100 83 MAITLAND FL 32751 84 City 85 Zip Code FL 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** Stonature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 117006 STRAATHOVEN, B.V. NAME 1.2 NAME **BEUKENHORSTLAAN 3,2244GA** STREET ADDRESS 1.3 STREET ADDRESS WASSENAAR NETHERLAND 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 2.1 TITLE STRAATEN-HARLAND, A. M. NAME 22 NAME **BEUKENHORSTLAAN 3,2244GA** STREET ADDRESS 2.3 STREET ADDRESS Wassenaar Netherland CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE TITLE LEERDAM, A.C. 3.2 NAME NAME 175 LOOKONT PLACE, SUITE 201 166 LOOKOUT PL, STE 201 STREET ADDRESS 3.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

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14. Thereby 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 and hal 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 receipt 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 op any florida made and the same legal effect as if made under oath, that I am an officer or director of the corporation or the receipt of the corporation of the

STREET ADDRESS