

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P35881** (2)

1. Corporation Name
SKIP PROPERTIES N.V., INC.



Principal Place of Business: **10501 NW 7TH AVENUE MIAMI FL 33150 US**
Mailing Address: **10501 NW 7TH AVENUE MIAMI FL 33150 US**

2. Foreign Place of Business: 21
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2a. Mailing Address: 26
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3. Date Incorporated or Qualified: **10/10/1991**
3a. Date of Last Report: **01/19/1995**
4. FEI Number: **98-0050977**
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:
**FELDMAN, BENNETT G.
2655 LEJEUNE ROAD, #541
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent:
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 609.001 and 609.011, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or new agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am hereby willing and accept the obligations of Section 609.001, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS:
1. NAME: **DS SASSON, ZAKAY** DELETED
2. STREET ADDRESS: ~~16477 NE 36 AVE MIAMI FL~~
3. TITLE: **DT** DELETED
4. NAME: **FEFER, ENRIQUE** DELETED
5. STREET ADDRESS: **16425 COLLINS AVENUE MIAMI BEACH FL**
6. TITLE: **D** DELETED
7. NAME: **CORPORATE AGENTS N.V.** DELETED
8. STREET ADDRESS: **23 PETERMAAT NETHERLAND ANTILLES** DELETED
9. NAME: DELETED
10. STREET ADDRESS: DELETED
11. NAME: DELETED
12. STREET ADDRESS: DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:
1. NAME: Change Addition
2. STREET ADDRESS: **16495 N.E. 32 Avenue Eastern Shores, Miami, Fla. 33160** Change Addition
3. NAME: **16425 Collins Avenue apt 2216 Miami Beach, Fla. 33160** Change Addition
4. STREET ADDRESS: **80 s.w. 8th Street, Suite 2000 Miami, Fla. 33130** Change Addition
5. NAME: Change Addition
6. STREET ADDRESS: Change Addition
7. NAME: Change Addition
8. STREET ADDRESS: Change Addition
9. NAME: Change Addition
10. STREET ADDRESS: Change Addition

14. I hereby certify that the information supplied to be filed is true, correct, furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information provided to the same is true and accurate and that my signature shall have the same legal effect as if made under oath. I am a duly authorized officer or director of the corporation 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 of this document as an officer or director with an address.

SIGNATURE: **Enrique Fefer** 02/09/96 305-7518571
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)