FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR 23 AM 10: 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P39560 (8)

1. Corporation Name
SELEX INTERNATIONAL B.V.

Principal Place of Business
GERRIT V.D. VEENSTRAAT 70
AMSTERDAM NETHERLANDS 1077EH

Mailing Address
GERRIT V.D. VEENSTRAAT 70
AMSTERDAM NETHERLANDS 1077EH

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 07/02/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: NOT APPLICABLE — 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
VOSE, GRETCHEN R. H.
2705 W. FAIRBANKS AVE.
WINTER PARK FL 32789

10. Name and Address of New Registered Agent
81 Name: Corporation Company of Miami
82 Street Address (P.O. Box Number is Not Acceptable): 201 S. Biscayne Blvd.
83 Suite 1600
84 City: Miami FL 85 Zip Code: 33131

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] Asst. Sec.

Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered agent signature required when reinstating.

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ZWAANS, C.L.J.J.
STREET ADDRESS	LITTLE MEADOW 6
CITY-ST-ZIP	UPPER HARBLEDOWN
TITLE	D
NAME	OPPERS, C.J.
STREET ADDRESS	KRANENBERG 11
CITY-ST-ZIP	CASTEREN, NETHERLANDS 5529ND
TITLE	~~D~~
NAME	~~WIJNANS, R.P.~~
STREET ADDRESS	~~NYEVELTSTREET 137~~
CITY-ST-ZIP	~~AM WASSENAAR, NETHERLANDS~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	Director	☐ Change ☒ Addition
1 2 NAME	Nipshagen, L.G.M.	
1 3 STREET ADDRESS	c/o Gerrit v.d. Veenstraat 70	
1 4 CITY-ST-ZIP	~~Amsterdam, the Netherlands,~~ 1077 EH	
2 1 TITLE	Director	☐ Change ☒ Addition
2 2 NAME	IBG Nederland B.V.	
2 3 STREET ADDRESS	c/o Gerrit v.d. Veenstraat 70	
2 4 CITY-ST-ZIP	Amsterdam, the Netherlands, 1077 EH	

300001438853
-03/24/95--01056--008
****200.00 ****200.00

CH

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(1)(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: [signature] 2/20/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
L.G.M. Nipshagen

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S00255

1. Corporation Name
KAR SERVICES INC

Principal Place of Business
9000 SW 87 CT # 202
MIAMI FL 33176

Mailing Address
9000 SW 87 CT # 202
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/11/1990
3a. Date of Last Report: 03/04/94
4. FEI Number: 65-0246185 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip 29 Country 30

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
M & W AGENTS INC
PENTHOUSE 1
9100 S DADELAND BLVD
MIAMI FL 33156

10. 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

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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROSEN, KENNETH A.
STREET ADDRESS	12400 SW 75 AVE
CITY ST ZIP	MIAMI FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

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	
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	

100001436211
-03/22/95--01044--003
****200.00 ****200.00

3/20/95 mcd

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)(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 if changed, or on an attachment with an address.

SIGNATURE: X KENNETH A ROSEN, DIRECTOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 3/14/95 305-279-6013