

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90082 015 ***158.75

DOCUMENT # P 98000102251
1. Corporation Name
BASEL TRUST CORPORATION

Principal Place of Business
3200 N. FED. HWY.
STE. 206-1
BOCA RATON, FL 33431
U.S.A.
Mailing Address
3200 N. FED. HWY.
STE. #206-1
BOCA RATON, FL 33431
U.S.A.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12-07-1998

2. Principal Place of Business
21 3200 N. Federal Hwy
Suite, Apt. #, etc.
22 Suite 206-1
City & State
23 BOCA RATON
Zip
24 33431 Country
25 FL
2a. Mailing Address
26 3200 N. Federal Hwy
Suite, Apt. #, etc.
27 Suite 206-1
City & State
28 BOCA RATON
Zip
29 33431 Country
30 FL

4. FEI Number
65-0882719
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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

KLEVER, PAUL

10. Name and Address of New Registered Agent

81 Name KLEVER, PAUL
82 Street Address (P.O. Box Number is Not Acceptable)
3200 N. Federal Highway
83 Suite # 206-1
84 City BOCA RATON FL 85 Zip Code 33431

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 typed or printed name of registered agent and title if applicable.

(REG. AGENT)
03-29-99

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
LANDLUM, MICHAEL
3200 N. Fed. Hwy. #206-1
BOCA RATON, FL 33431
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
JOSEF EBERHARDT
3200 N. FED. HWY. #206-1
BOCA RATON, FL 33431
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D P
HAPDAT, MIKE
3200 N. FED. HWY. 206-1
BOCA RATON, FL 33431
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 IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
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
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 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)(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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-99 (501) 384-3300

Date

Daytime Phone #

CR2E034 (11/98)