FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **V24458** **(4)**

1. Corporation Name

VANBAAK CARIDA INC.

Principal Place of Business	Mailing Address
1500 CORDOVA RD. SUTIE 310 FT. LAUDERDALE FL 33316 US	1500 CARDOVA RD. SUITE 310 FT. LAUDERDALE FL 33316 US

2. Principal Place of Business	2a. Mailing Address
21 313 ½ WORTH AVENUE	26 313 ½ WORTH AVENUE
Suite, Apt. #, etc. 22 BUILDING B	Suite, Apt. #, etc. 27 BUILDING B
City & State 23 PALM BEACH, FL	City & State 28 PALM BEACH, FL
Zip / Country 24 33480-4669 / 25 USA	Zip / Country 29 33480-4669 / 30 USA

3. Date Incorporated or Qualified: **03/27/1992**

3a. Date of Last Report: **04/18/1995**

4. FEI Number: **65-0328719** ☐ 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

CARIDA, DIANA M R.
1500 CORDOVA ROAD, STE. 310
SUITE 137
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name: CARIDA, DIANA M.R.
82 Street Address (P.O. Box Number is Not Acceptable): 313 ½ WORTH AVENUE
83 BUILDING B
84 City: PALM BEACH **FL** 85 Zip Code: 33480

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: Diana M. R. Carida — 1 APRIL '96
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent's signature required when filing) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SPT	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	VAN BAAK, GERALD		1.2 NAME		
STREET ADDRESS	6301 N OCEAN BLVD		1.3 STREET ADDRESS	249 BRAZILIAN AVENUE	
CITY-ST-ZIP	OCEAN RIDGE FL		1.4 CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	DVPS	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	CARIDA, DIANA		2.2 NAME		
STREET ADDRESS	6301 N OCEAN BLVD		2.3 STREET ADDRESS	249 BRAZILIAN AVENUE	
CITY-ST-ZIP	OCEAN RIDGE FL		2.4 CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
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		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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: Diana M. R. Carida — 1 APRIL '96 — 407-655-9123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)