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Jan 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P28624 (5)
1. Corporation Name
POSTCREEK CORP., N.V.



Principal Place of Business Mailing Address
ERIC HAYMANN GENERAL WILLE-STR. 10 8027 ZURICH / SWITZERLAND
ERIC HAYMANN BELLERIVESTRASSE 201 8034 ZU PO BO SW

3. Date Incorporated or Qualified 03/26/1990
3a. Date of Last Report 02/21/1996

2. Principal Place of Business 2a. Mailing Address
21 c/o Dr. Eric Haymann 26 c/o Dr. Eric Haymann
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 Bellerivestrasse 201 27 Bellerivestrasse 201
City & State City & State
23 8034 Zurich, P.O.Box 385 28 8034 Zurich, P.O.Box 385
Zip Country Zip Country
24 Switzerland 29 Switzerland 30 Switzerland

4. FEI Number 98-0212932 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
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCLARRY, GEORGE C.
301 NORTH FERNCREEK AVE.
ORLANDO FL 32803

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETED
NAME TMF (NETHERLANDS ANTILLES) N.V.
STREET ADDRESS DE RYTERKADE 58 A
CITY-ST-ZIP CURACAO, N.A.
[Empty rows for other officers/directors]

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
[Empty rows for additions/changes]

14. I do 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 of this report or on an attachment with an address.

SIGNATURE: Albert Matzinger, Managing Director

January 17, 1997

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