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

**FILED** Feb 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)595867 JOEL ZWELLING SALES, INC. Mailing Address Principal Place of Business 10300 S.W. 88TH AVE. 10300 S.W. B8TH AVE. MIAMI EL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1978 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 59-1863840 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation owes or has paid the current year Intangible Zip Country Zip Yes Yes Personal Property Tax due June 30. □ No 25 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Kramer, Robert M 4000 HOLLYWOOD BLVD #485 S 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 Zip Code City 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent's gnature required whon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE PST ZWELLING JOEL R. 1.2 NAME NAME 10300 SW 88 AVE. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 THILE TITLE ZWELLING, DELORES M. 22 NAME NAME 10300 SW 88 AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2 4 CHY-S1-ZIP CITY-ST-ZIP Addition DELETE 3.1 1HLE Change TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-S1-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 THE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TIDE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 61101E TITLE

14. 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 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, at on an attackment with an address.

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP