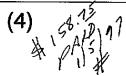
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT

CORPORATION ANNUAL REPORT 1998

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S24413



**FILED** Jan 15 1998 8:00am Secretary of State

SANCH	IEZ-ZEINALI & ASSOCIATES	, INC.	PASS	
Principal Plac	e of Business	Mailing Address	•	
1430 SOUTH MIAMI AVENUE  1430 SOUTH MIAMI AVENUE  MIAMI FL 33130-7779  47/3  47/3				DO NOT WRITE IN THIS SPACE
		- 7		3. Date Incorporated or Qualified
				01/11/1991
	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	JI	26		65-0233471 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & Stat		27		Fee Required
	<del>u</del>	City & State		6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip	Country	28		Trust Fund Contribution
24 33130-		Zip	Country	8. This corporation owes or has paid the current year Intangible
24 331.50	9. Name and Address of Current	29 33/30-47/33	30	Personal Property Tax due June 30. Yes No
		Registered Agent	81 Name	10. Name and Address of New Registered Agent
(	NCHEZ-ZEINALI, BETTY		101 Maine	
2121 S. BAYSHORE DRIVE			82 Street	Address (P.O. Box Number is Not Acceptable)
MIA	MI FL 33133		-	
			83	
			84 City	85 Zip Code
## Divinion	to the marketone of Continue COZ OCCO			FL as zp code
office or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accent the appointment as registered				
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	_ Mily xun	1- Thurst	-	1/5/97
12.	OFFICERS AND			e required when reinstating) /OATE /
TITLE	P	DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	•			The process of the change of Auditum
	SANCHEZ-ZEINALI, BETTY		1.2 NAME	FRANK ZEINALI 2/21 S. BAYSHORE DR.
STREET ADDRESS	2121 S. BAYSHORE DRIVE		1.3 STREET ADDRESS	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1
CITY - ST - ZIP	MIAMI FL 33133	The state of	1.4 CITY-ST-ZIP	MIAMI, FL. 33/33
TITLE		DELETE	2.1 TITLE	L. Change L. Addition C
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
TITLE		L 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		L 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				
0111-01-21			6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filling 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:**