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

PROFIT CORPORATION **ANNUAL REPORT**

1998

|新女子は古の子の「中央などの一部のはなっ」。 地域のマイト・・東京の人によりものではないのです。 これないではは地域にはまなり、これでは一種では、年代の一年の一種では、日本の一種では、日本の一種では



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F90037

(5)

FILED									
Jan 30 1998 8:00am									
Secretary of State									

ZERO	34 REGISTRATION CORP.	• •									
Bringing Diog	on of Business	Malling Address					<u> </u>				
•	e of Business	Mailing Address									
201 ALHAMBRA CIRCLE 201 ALHAMBRA CIRCLE 711											
CORAL GABLES FL 33134 CORAL GABLES FL 33134							DO NOT WRITE IN	THIS S	PACE		
US		US					3. Date Incorporated or Qualified				
							07/09/1982				
· · · · · · · · · · · · · · · · · · ·	Place of Business	2a. Mailing Address					4. FEI Number		ļ	Applied	
Suite, Apt.	4	Suite, Apt. #, etc.					59-2204286				plicable
22 Suite, Apr.	* , etc.	27				5. Certificate of Status Desired]	4	5 Addit Require		
City & State	e	City & State	——————————————————————————————————————				Election Campaign Financing			00 May	
23		28					Trust Fund Contribution	3		ed to Fe	
Zip	Country	Zip	Cou	intry			8. This corporation owes or has paid t	he curr	ent year	Intangi	ble
24	25	29	30				Personal Property Tax due June 30] Yes	XN)
	g. Name and Address of Curre	nt Registered Agent					10. Name and Address of New Regis	tered A	gent		
	HLIG, FRANCIS M.			B1	Name	•					J
	1 ALHAMBRA CIRCLE			82	Street	Addres	s (P.O. Box Number is Not Acceptable)				
	WITE 711			83							
CO	ORAL GABLES FL 33134			03							ļ
				84	City			FL	85 Z	ip Code	ə
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statu	tes the a	DOVE	named	corpor	ation submits this statement for the pure		changir	n its rec	nistered
office or r	registered agent, or both, in the State	of Florida, Such change was	authorize	d by	the cor	poration	ation submits this statement for the purp o's board of directors. I hereby accept the	ne appo	intment	as regi	stered
	in familiar with, and accept the oblig	lations of, Section 607.0505, Fi	orida Stai	utes	3.						ł
SIGNATURE	Signature typed or printed name of registered age	ont and title if applicable (NO	TE Registere	1 Age	nt signature	beriuper e	when reinstating)	DATE			
12.		D DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICER	S AND	DIRECT	ORS IN	12
TITLE	PD DELETE 1.1 TO		TLE				Į.	Chang	je 🔲	Addition	
NAME	POHLIG, FRANCIS M.	ITP 411	1.2 N/	ME							,
STREET ADDRESS	201 ALHAMBRA CIRCLE, SUI	IIE /11	1.3 \$1	REET	ADDRESS						ļi.
CITY-ST-ZIP	CORAL GABLES FL	DELETE		1.4 CITY - ST - ZIP			·		Chang		Addition
TITLE	STEPHENS, SUE ANN	□ DETE 1€	21 TITLE 22 NAME					ı	Criant	ie FT	Addition
NAME STREET ADDRESS	201 ALHAMBRA CIRCLE, #7	11	- 1		ADDRESS						ŀ
CITY-ST-ZIP	CORAL GABLES FL	11		T-ZIP							
TITLE	DI		3.1 TI		11-215	 			Chang	ge 🗌	Addition
NAME	05140 0840 00484			ME				•	•		ľ
STREET ADDRESS	201 ALHAMBRA CIRCLE, #7	11	3.3 S1	REET.	ADDRESS						ļ
CITY-ST-ZIP	CORAL GABLES FL		3.4. C	TY - Ş	T-ZIP					_	
TITLE		DELETE	4.1 T/	LE				Ţ	Chang	је 🔲	Addition
NAME			4. 2 N	AME							
STREET ADDRESS			4.3 ST	REET	ADDRESS	1					1
CITY-ST-ZIP		- Driete	4.4 CI	_	r-ZIP	<u> </u>		·			Little
TITLE		DELETE	5.1 TI					ı	∐ Chang	ie 🗀	Addition
NAME CIRET ADDOCCO			5.2 NA		1000000	1					ļ
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 TII		1 - ZIP				Chang	ne [Addition
NAME		F1 perc.r	62 NA			}			J. C. Land	,- []	
STREET ADDRESS			1		ADDRESS						
CITY-ST-ZIP			6.4 CI								
	certify that the information supplied w	ith this filing does not quality				ed in Sc	ection 119.07(3)(i), Florida Statutes. I furt	her cert	tify that	the infor	mation

indicated on this ennual report or actiplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the countries of the deliver or trustee emprovered 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 as a pachment with an address.

GNATURE: