SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTA[illegible]0.)

PROFIT CORPORATION AN[illegible] **REINSTATEMENT** 1997

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

FILED
97 DEC -4 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 97

DO NOT WRITE IN THIS SPACE

DOCUMENT # F96000000011 (4)

1. Corporation Name
JOHN ZIDIAN CO., INC.

Principal Place of Business
65 COITSVILLE HUBBARD RD.
YOUNGSTOWN OH 44505

Mailing Address
65 COITSVILLE HUBBARD RD.
YOUNGSTOWN OH 44505

3. Date Incorporated or Qualified: 01/02/1996
3a. Date of Last Report:
4. FEI Number: 34-1638717 — 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 — Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 — Country — 30

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
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 607.1008, 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 [illegible] Statutes.

SIGNATURE: PETER F. SOUZA, ASSISTANT SECRETARY — 12/2/97
Signature and printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	CV	☐ DELETE
NAME	ZIDIAN, THOMAS R	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	
TITLE	C	☐ DELETE
NAME	CURLEY, RAY	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	
TITLE	D	☐ DELETE
NAME	DOBOS, J.C.	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	
TITLE	P	☐ DELETE
NAME	ZIDIAN, JOHN	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	
TITLE	S	☐ DELETE
NAME	ZIDIAN, ALICE	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	
TITLE	T	☐ DELETE
NAME	ZIDIAN, JIM	
STREET ADDRESS	65 COITSVILLE HUBBARD RD	
CITY-ST-ZIP	YOUNGSTOWN OH 44505	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	000002368[illegible]	☐ Change ☐ Addition
1.2 NAME	-12/10/97--01113--012	
1.3 STREET ADDRESS	****750.00 ****750.00	
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (4/97)

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 if changed, or on an attachment with an address.

SIGNATURE: 10-31-97