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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # G29417 (4)

i. Corporation N										
ZACK TI	RADING, INC.									
rincipa! Place o	f Business	Mailing Ad	ddress				i idibitili dala mata di di di di di di))(1881 81811 A11	111 A1511 A1411 A	·611 01211 1001
700 W. BROW			BROWARD BLV							
FT. LAUDERDA	NLE FL 33312	FT. LAU	JDERDALE FL 3	3312				- 1	(1)	
							 Date Incorporated or Qualified 02/25/1983 		e of Last Rep 4/25/199	
							4, FEI Number			pplied For
Principal Place of Business		2a. Mailing	g Address				59-2258344		L	ot Applicable
		26 Suite	Apt. #. etc.		*				\$8.75	Additional
Suite, Apt. #,	, etc.	27	7470. 11. 010.				5. Certificate of Status Desired		Fee R	equired
City & State			City & State		6. Election Campaign Financing \$5.00 N		•			
		28					Trust Fund Contribution			to Fees
Zip	Country	Zφ		\vdash	ountry		8. This corporation has liability for	or intangible t es 🔲 No	ax under s	199.032,
	25	29		30	-т		Florida Statutes X Y 10. Name and Address of New		Agent	
	9. Name and Address of Curr	ent Registered	Agent		81	Name	(b) Hame and Address of the			
							S. S	abla)		
	CKOWITZ, CINDY S				82	Street Ac	dress (P.O. Box Number is Not Accept	аслеј		
517 SW					83					
FT LAUU	DERDALE FL 33301					-			85 Zip	Code
					84	'	poration submits this statement for the point of directors. Thereby accept the a	Fl	_ ' '	
	Signar ine, typed or proped carrier of religibles that	om as included and and AND DIRECTORS		Die Rogste		it signature red	ADDITIONS/CHANGES TO C	DATE	ID DIRECTO	RS IN 12
2. ITLE	PVD	AND DIRECTORS	DELETE		t Tirle				Change	Addition
AMÉ	ZACKOWITZ, MARTIN			1	2 NAME					
TREET ADDRESS	700 WEST BROWARD BLY	/D.		1	3 STREE	LADDRESS				
ITY-ST-ZIP	FT. LAUDERDALE FL			1	4 C-TY -:	S1 - 71P			Change	Additio
TLF	STD		DELETE	. 2	1 TITLE	İ			☐ Change	[Addition
IAME	ZACKOWITZ, ROSE	_			2 NAME					
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ITY-ST-ZIP	FT. LAUDERDALE FL		DELETE		4 CITY -	21 - /11-			☐ Change	Additio
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AME				3	3 STREE	ET ADDRESS				
TREET ADDRESS CITY - ST - ZIP				3	4 CITY -	ST - ZIF				prompt a contract
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IAME				4	2 NAME					
	1			4	3 STREE	EL ADORESS				
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						ST-ZIP			☐ Chance	Aucini
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CITY-ST-ZIP TITLE NAME			☐ DELETE	!	1 TITLE 2 NAME 3 STREE	ET ADORESS			☐ Change	Adding
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					5 1 TITLE 5 2 NAME 5 3 STREE 5 4 CHY 6 1 TITLE 6 2 NAME	ET ADORESS - ST-ZIP -				☐ Addilie
CITY-ST-ZIP TITLE NAME STREET ADDRESS			DELETE		5 1 TITLE 5 2 NAME 5 3 STREE 5 4 CHY 6 1 TITLE 6 2 NAME 6 3 STREE	ET ADORESS -ST-ZIP	lify for the exemption stated in Section curate and that my signature shall have		☐ Change	Addilio

certify that the information indicated on this annual report or supplemental annual oath; that I am an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if changing, or or an attackment with an additional contents of the corporation or the receiver or trustee appears in Block 12 or Block 13 if changing, or or an attackment with an additional contents of the corporation of the corp report is true and accurate and that thy signature sharmave the same regard report of it mode that repowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: X