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

 PROFIT Apr 13 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J16130 (3) D. ZUCKERMAN, P.A. Principal Place of Business Mailing Address 2701 OAKBROOK MANOR 2701 OAKBROOK MANOR FT LAUDERDALE FL 33332 FT LAUDERDALE FL 33332 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/21/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2681403 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 0 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees ZiD Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZUCKERMAN, DONALD S. 2701 OAKBROOK MANOR 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33332 83 Zip Code 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of nigertess Lagent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change Addition 111016 ZUCKERMAN, DONALD S. NAME 1.2 NAME 2701 OAKBROOK MANOR STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE THUE Change Addition 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE Change Addition 4.1 THLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - \$1 - ZIP DELFTE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Addition TITLE Change 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 14. I 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 suppliemental 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

attachment with an address.

**FILED**