2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

05-02-2005 90086 022 ****50.00 **DOCUMENT # L03000020061** ZNA, LLC 30008297 Principal Place of Business Mailing Address 7240 W ATLANTIC BLVD 7240 W ATLANTIC BLVD MARGATE, FL 33063 MARGATE, FL 33063 04232005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 58-2672548 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALI, MIAN MUMTAZ DO NOT WRITE 5015 WILES RD # 304 COCONUT CREEK, FL 33073 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, if am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered against and site of applicable. (NOTE: Registered Agent signs and squired vines remaining) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE ALI, SAKINA NAME 5015 WILES RD #304 STREET ADDRESS COCONUT CREEK, FL 33073 CITY-SI- AP MGRM IIINE ALI, MIAN MUMTAZ 5015 WILES RD #304 STREET ADDRESS CITY-ST-ZIF COCONUT CREEK, FL 33073 TIFLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-S1-ZP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption state: in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if mude under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. 5-26.05 SIGNATURE: MBEA, OR AUTHORIZED REPRESENTATIVE Daytene Phone 6

FILED

May 31, 2005 8:00 am Secretary of State