FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5)L10937 ZAIDAN ENTERPRISES, INC. Principal Place of Business Mailing Address 7725 ULMERTON ROAD 7725 ULMERTON ROAD **LARGO FL 34641 LARGO FL 34641** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/21/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2965087 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing \Box 28 Trust Fund Contribution Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ZAIDAN, ADAM S 2400 FEATHER SOUND DRIVE Street Address (P.O. Box Number is Not Acceptable) 83 **CLEARWATER FL 34622** City 84 Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE TITLE ZAJDAN, ADAM S NAME 1.2 NAME 2400 FEATHER SOUND DRIVE, #735 STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 1.4 City - ST - 7/P CITY-ST-ZIP DELETE 2.1 TITLE NAME 2.2 NAME

東京國家中國國家大學·阿拉拉斯中國教育人士 丁丁香 · 西班牙斯

SIGNATURE:

FILED Apr 14 1998 8:00am Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

(813) 538-8866

Not Applicable

85 Zip Code 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 of the receiver or trusted empewered 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 a) attachment with a) address.

4-6-98