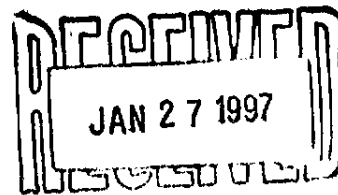


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



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



FILING FEE
\$ 203.75 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L95000000877

ZINGG INVESTMENT GROUP, L.C.
7270 NW 12TH STREET
PENTHOUSE I
MIAMI FL 33126

1a. Principal Place of Business Address
7270 NW 12TH STREET
PENTHOUSE I
MIAMI FL 33126

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

11/15/1995

FL

4. FEI Number

65-0632475

☐ Applied For

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

04/02/1996

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

BRODIE, SIDNEY Z ESQ.
7270 NW 12TH STREET
PENTHOUSE I
MIAMI FL 33126

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-registering)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM ZINGG, HERMANN

7270 NW 12TH STREET, PENTH MIAMI FL

600002131486--3
-04/02/97--01080--019
****203.75 ****203.75

11. 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 is true and accurate and that my signature shall have the same legal effect as if made 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE D ON PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #