2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M40936

Title:

Name:

Address:

City-St-Zip:

FILED Feb 14, 2005 Secretary of State

Entity Nam	ne: ZYSCOVIC	H, INC.					
Current Pri	incipal Place o	f Business:	New Princ	New Principal Place of Business:			
100 N. BISC 27TH FLOC MIAMI, FL							
Current Mailing Address:			New Mailir	New Mailing Address:			
100 N. BISC 27TH FLOC MIAMI, FL							
FEI Number:	59-2754852	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired	I (X)	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	H, BERNARD CIANA AVENUE 33133 US	≣					
The above in the State		bmits this statement for the pur	pose of changing it	s registered o	office or registered agent, c	or both,	
SIGNATUR							
Fl 4: 0		Signature of Registered Agent			Date		
Election Cam	paign Financing	rust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	DP () D ZYSCOVICH, BER 100 N BYSCANE MIAMI, FL 33132	RNARD, BLVD	Title: Name: Address: City-St-Zip:	ZYSCOVICH, B	NE BLVD., 27TH FLOOR		
Title: Name: Address: City-St-Zip:	S () D JACOBS, CHERY 100 N BYSCANE MIAMI, FL 33132	L H BLVD	Title: Name: Address: City-St-Zip:	JACOBS, CHER	NE BLVD., 27TH FLOOR		
Title: Name: Address: City-St-Zip:	VP () D MURGUIDO, JOS 100 N BYSCANE MIAMI, FL 33132	E BLVD	Title: Name: Address: City-St-Zip:	MURGUIDO, JO	NE BLVD., 27TH FLOOR		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JANINE GLOTTMANN 02/14/2005 Τ

() Delete

() Change (X) Addition

100 N BISCAYNE BLVD., 27TH FLOOR

GLOTTMANN, JANINE

MIAMI, FL 33132