2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

May 03, 2005 8:00 am Secretary of State **DOCUMENT # P00000114695** 05-03-2005 90166 001 ***150.00 ZITOS INVESTMENT CORP. Principal Place of Business Mailing Address 3300 NE 191ST STREET #1707 3300 NE 191ST STREET #1707 AVENTURA, FL 33180 AVENTURA, FL 33180 2. Principal Place of Business 375 NE 18 AVP 375 NE 18 Suite, Apt. #, etc. 04292005 CR2E034 (10/03) Chg-P Applied For City & State 4. FEI Number 65-1061265 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Donsk WINER, CLARA 3300 NE 191ST STREET #1707 #1707 AVENTURA, FL 33180 Aventura 8. The above name of entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. MLE Delete THLE ☐ Change ☐ Addition WINER, CLARA NAME NAME STREET ADDRESS 3300 NE 191ST STREET #1707 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-ZIP VP ☐ Defete (X) Change Addition TITLE Donskoy Ana 3300 NE 191str. Suite 1707 DONSKOY, ANA NAME NAME 3300 NE 191ST, SUITE #1707 STREET ADDRESS STREET ADDRESS Aventura, FL. 33180. CITY-ST-7P AVENTURA, FL 33180 CITY-ST-7IP ☐ Change Addition Delete TITLE TIME WINER, DINA NAME NAME 3300 NF 191ST STREET #1707 STREET ADDRESS STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. 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 report or supplemental 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 Block 10 or Block 11 if changed, or on an attact/frient with an address, with all other like empowered. 4128105

FILED