

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019887

FILED  
Apr 04, 2004  
Secretary of State

Entity Name: ZARINA ENTERTAINMENT CORP.

## Current Principal Place of Business:

19390 COLLINS AVE  
#309A  
SUNNY ISLES BEACH, FL 33160

## New Principal Place of Business:

3135 NE 184TH ST  
#2203  
AVENTURA, FL 33160 US

## Current Mailing Address:

19390 COLLINS AVE  
#309A  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

3135 NE 184TH ST  
#2203  
AVENTURA, FL 33160 US

FEI Number: 65-1083707

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEGA, JOSE  
25 SE 2ND AVE  
#410  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: LARROCA DE KOTTAR, MARTA INES  
Address: 1939 COLLINS AVE #309A  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: S ( ) Delete  
Name: KOTTAR, FLAVIO P  
Address: 1939 COLLINS AVE #309A  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: PT ( ) Delete  
Name: LARROCA DE KOHAR, MARTA INES  
Address: 1939 COLLINS AVE #309A  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition  
Name: LARROCA DE KOTTAR, MARTA I  
Address: 3135 NE 184TH ST #2203  
City-St-Zip: AVENTURA, FL 33160

Title: S (X) Change ( ) Addition  
Name: KOTTAR, FLAVIO P  
Address: 3135 NE 184TH ST #2203  
City-St-Zip: AVENTURA, FL 33160

Title: PT (X) Change ( ) Addition  
Name: LARROCA DE KOTTAR, MARTA I  
Address: 3135 NE 184TH ST #2203  
City-St-Zip: AVENTURA, FL 33160

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.

SIGNATURE: MARTA I LARROCA DE KOTTAR

DV

04/04/2004

Electronic Signature of Signing Officer or Director

Date