

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019887

FILED  
Apr 06, 2007  
Secretary of State

Entity Name: ZARINA ENTERTAINMENT CORP.

## Current Principal Place of Business:

21190 MAIN SAIL CIR  
A13  
AVENTURA, FL 33180 US

## Current Mailing Address:

21190 MAIN SAIL CIR  
A13  
AVENTURA, FL 33180 US

## New Principal Place of Business:

20000 E COUNTRY CLUB DR  
811  
AVENTURA, FL 33180 US

## New Mailing Address:

20000 E COUNTRY CLUB DR  
811  
AVENTURA, FL 33180 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 I  
Address: 21190 MAIN SAIL CIR APT#A13  
City-St-Zip: AVENTURA, FL 33180

Title: S ( ) Delete  
Name: KOTTAR, FLAVIO P  
Address: 21190 MAIN SAIL CIR APT#A13  
City-St-Zip: AVENTURA, FL 33180

Title: PT ( ) Delete  
Name: LARROCA DE KOTTAR, MARTA I  
Address: 21190 MAIN SAIL CIR APT#A13  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition  
Name: LARROCA DE KOTTAR, MARTA I  
Address: 20000 E COUNTRY CLUB DR #811  
City-St-Zip: AVENTURA, FL 33180

Title: S (X) Change ( ) Addition  
Name: KOTTAR, FLAVIO P  
Address: 20000 E COUNTRY CLUB DR #811  
City-St-Zip: AVENTURA, FL 33180

Title: PT (X) Change ( ) Addition  
Name: LARROCA DE KOTTAR, MARTA I  
Address: 20000 E COUNTRY CLUB DR #811  
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 LARROCA DE KOTTAR

DV

04/06/2007

Electronic Signature of Signing Officer or Director

Date