2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 03, 2004 8:00 am Secretary of State DOCUMENT # P03000105645 05-03-2004 90714 045 ***150.00 ZAHARI INVESTMENTS INC. Mailing Address Principal Place of Business 94079300 2875 N.E. 191ST STREET, 801 2875 N.E. 191ST STREET, 801 AVENTURA, FL 33180 AVENTURA, FL 33180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 04212004 Chq-P City & State City & State 4. FEI Number Applied For 20-0851 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SERBER, DANIEL J ESQ Street Address (P.O. Box Number is Not Acceptable) 2875 N.E. 191ST STREET **TURNBERRY PLAZA, SUITE 801** AVENTURA, FL 33180 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ■ Addition TITLE Delete TITLE ☐ Change HARARI, JACK A NAME STREET ADDRESS 2875 N.E. 191ST STREET, 801 STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 CITY-ST-ZIP ☐ Change □ Addition Delete TITLE TITLE ZAYAT, MOISES A NAME NAME STREET ADDRESS 2875 N.E. 191ST STREET, 801 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-\$T-ZIP Delete. TITLE-☐ Change Addition HARARI; RAFAEL A -NAME NAME STREET ADDRESS 2875 N.E. 191ST STREET, 801 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVENTURA, FL 33180 Delete Change ☐ Addition TITLE MOHANA, ISIDORO D NAME NAME STREET ADDRESS 2875 N.E. 191ST STREET, 801 STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 CITY-ST-7iP ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP stiffing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information lean accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director and to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if rall other like empowered. 12. I hereby certify that the information supplied indicated on this report or supplementar of the corporation or the receiver or trus changed, or on an attachment with an

OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

FILED