## FILED Mar 18, 2008 8:00 am Secretary of State 01-25-2008 90027 028 \*\*\*150.00

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## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000100293  1. Entity Name ZWH MANAGEMENT CORPORATION  Principal Place of Business 20505 E. COUNTRY CLUB DRIVE  Mailing Address 20505 E. COUNTRY CLUB DRIVE								e	6004	222	
#1131   AVENTURA, FL 33180				#1131 AVENTURA. FL 33180							
2. Principal Place of Business - No P.O. Box # 3. Mailing Address											
Suite, Apt. #, stc.				Suite, Apt. #, etc.			-				IT II II IE II
						01112008	Chg-P	CR2E0	34 (12/06)	-lied Co-	
City & State			_	City & State		4. FEI Number 20–315			No	plied For Applicable	
Zip	Country			Zip		itry	5. Certificate	ol Status Desired		\$8.75 Add Fee Required	idonal i
Name and Address of Current Registered Agent						Name	7. Name and	Address of New R	egistered /	Agent	
NASCO, ROXANA I 2450 NE MIAMI GARDENS DRIVE 2ND FLOOR						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33180											
· ·						City			FL		
	named entiti ions of regis	y'submits this statement l tered agent.	or the	purpose of changing its	register	ed office or registe	ered agent, or bo	th, in the State of Flo	rida. I am	ternilier with,	and accept
SIGNATURE.	Souther Mad	or printed name of registered ager	n and title	of applicable. (NOT	F: Registers	od Agent signeture nyture	ed when reinstating)		CATE	<del></del>	[
FiL After M	E NOW!!! ay 1, 200	FEE IS \$150.00 8 Fee will be \$550	.00	9. Election Campa Trust Fund Conf			5.00 May Be ded to Fees			-	
10.	PS	OFFICERS AN	DIRE	CTORS Delete	11. III		ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTOR:	S IIN 13
NAME	HECHTER, ZEEV 20505 E. COUNTRY CLUB DRIVE					Æ				م مدین	_ ~~~ )
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TITLE				☐ (Celeta	TITL	=		-		Change	☐ Addition
STREET ADORESS CITY-ST-ZIP	ļ				SIR	EET AOORESS Y-ST-ZIP					
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NAME STREET ADDRESS	}					EET ADDRESS					
TITLE				Defets	TITE	Y·SI-ZP	<del></del>			☐ Change	☐ Addition
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CITY-S1-ZIP				<u> </u>		Y-ST-ZIP				<u></u>	Class
TITLE NAME				☐ Delete	NA!					☐ Change	Addition
STREET ADORESS CITY-ST-ZIP					-	EET ADDRESS Y-ST-ZIP					
mu				C) Cheleste	III					Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP						ME REET ADORESS Y-S1-ZIP					
I dithe co	mooration or	he information supplied wort or suppliemental reporting receiver or trustee entachment with an address	ipower	ed to execute this tebor	t as requ	xemptions contains ature shall have the ired by Chapter 60	ed in Chapter 11 e same legal effe 07, Florida Statut	9, Florida Statutes. ct as if made under es; and that my name	further cer oath; that I e appears	rtify that the in am an officer in Block 10 o	nformation or director r Block 11 if
SIGNA	TURE:	Zenn. a	7.	HIPML	n ne ~**	C108	3-	10-08		Oavlane Phone #	