SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State (TREPIT OF CONFORATIONS **1996**6 -14-91 P93000049263 (5) **DOCUMENT #** ZOLLIN LAND. - ENTERPRISES, INC. Principa' Place of Business Mailing Address 122 ISLE OF VENICE 122 ISLE OF VENICE APT #4 APT #4 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 3a. Dale of Last Report 3. Date Incorporated or Qualified HS US 07/13/1993 04/21/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For SAME 65-0423131 SAME 21 26 Not Applicable Suite, Apt. #, etc Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Added to Fees Trust Fund Contribution $Z_{\rm IP}$ Country Country This corporation has liability for intangible tax under s. 199 032 24 25 30 Yes X No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CASE, JOHN W 2900 EAST OAKLAND PARK BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 THIRD FLOOR 83 FORT LAUDERDALE FL 33308 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stynalize: typical or product inserior of registered agent and title if approaches (Min' fill flespatened Agent supartize te pured where relastiting) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (36/8)DPV DELETE THILE 1.1 TIFLE Changa Addition ZOLLIN, ULRICH NAME 1.2 NAME **CR2E034** 122 ISLE OF VENICE, APT. 4 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY - ST - ZIP 14 CHY ST-ZIP DELETE Trite ST Change Addition 2.1 TITLE ZOLLIN, BEATE S NAME 2.2 NAME 122 ISLE OF VENICE, APT. 4 STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY- ST-ZIP 2 4 C TY - ST - ZIP DELFTE TITLE Otranne Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 III:E Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - ST- ZiP 4 4 CITY - ST - ZIP TITLE DELETE Change Addition 5.1 DE 6 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 61 THEE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a made under oath. If at I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

June 6. 1996

954-765-2405