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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000086721 (6)

ZYX CORPORATION

FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Making Address E72 MORTHWEST 7400 AVENUE MIAMI FL 33166 2. Principal Place of Business 3. Date Incorporated or Qualified 12/20/1993 Sulto, Apt. #, etc. 2. Sulto, Apt. #, etc. 2. Sulto, Apt. #, etc. 2. City & State 2. Principal Place of Business 3. Date Incorporated or Qualified 12/20/1993 Sulto, Apt. #, etc. 2. Sulto, Apt. #, etc. 2. City & State 2. City & State 2. City & State 3. December of Status Depined Sp.75 Additional Principle Previous Sp.75 Additional Principle Previous Principle Previous Principal Principle Previous Principal Principle Previous Principal Principle Previous Principal Princ											
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Zip Country Zip Country Zip Country Zip Country St. This corporation owes or has paid the current year triangible Personal Property Tax due June 30.				· ·····							
9. Name and Address of Current Registered Agent HILLMAN-WALLER, LOUIS M ESO. 901 PONCE DE LEON BLVD. STE. 502 CORAL GABLES FL 33134 83 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids 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 Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11/12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11/12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11/12. OFFICERS AND DIRECTORS 13. SIRECT ADDRESS CITY. 51-2/P MIAMI FL 33168 14. CITY. 51-2/P 15. TITLE 10. DELETE 21. TITLE 22. STREET ADDRESS 22. STREET ADDRESS 23. STREET ADDRESS 24. CITY. 51-2/P 14. CITY. 51-2/P 15. TITLE 25. CITY. 51-2/P 16. Change Addition AME 37. STREET ADDRESS 32. STREET ADDRESS 33. STREET ADDRESS 34. CITY. 51-2/P 17. ST. 2/P 17. ST. 2/P 17. ST. 2/P 17. ST. 2/P 17. Change Addition AME 32. ADDITIONS/CHANGES IN 12 17. Change Addition AME 32. ADDITIONS/CHANGES IN 12 Change Addition AME 32. ADDITIONS/CHANGES IN 12 Change Addition AME 32. ADDITIONS/CHANGES IN 12 Change Addition AME 33. STREET ADDRESS 44. CITY. 51-2/P 45. CITY. 51-2/P 45. CITY. 51-2/P 46. CITY. 51-2/P 47. TITLE 47. CITY. 51-2/P 48. CITY. 51-2/P 49. CITY. 51-2							,				
10. Name and Address of New Registered Agent 10. Name and Address 10. Name and Addr	24				_	-					
PONCE DE LEON BLVD. STE. 502 CORAL GABLES FL 33134 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85 Zip Code 81 Acceptable					1001						
SOI PONCE DE LEON BLVD. STE. 502 CORAL GABLES FL 33134 84 City FL 85 Zip Code 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signalize, byed or preed name of registered agent are for the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12 TITLE D OFFICERS AND DIRECTORS 11. TITLE D ANDARA, JOHN 6732 N.W. 72ND AVENUE 13. SIRRET ADDRESS CITYS1-ZIP MIAMI FL 33166 14. CITYS1-ZIP MIAMI FL 33166 14. CITYS1-ZIP DELETE 21. TITLE 22. NAME 22. NAME 23. SIRRET ADDRESS CITYS1-ZIP MIAMI FL 33166 14. CITYS1-ZIP Change Addition NAME SIRRET ADDRESS 23. SIRRET ADDRESS 24. CITYS1-ZIP TITLE DELETE 31. TITLE Change Addition NAME 32. NAME 33. SIRRET ADDRESS 34. CITYS1-ZIP 34. CITYS1-ZIP 35. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 35. ADDITIONS/CHANGES TO OFFICER	HIL	LMAN-WALLER, LOUIS M ES	SQ.			61	Name				
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### City ###						83					
TIL. 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. I hereby accept the appointment as registered agent and tan familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or privated terms of registered agent and titlo if applicable. (NOTE Registered Agent agrature required when reinstating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ANDARA, JOHN SIREET ADDRESS CITY -S1-2IP MIAMI FL 33168 14. CITY -S1-2IP TITLE DELETE 21. TITLE Addition MAME SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition MAME SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition ANDERS SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition AMAE SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition ANAME SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition ANAME SIREET ADDRESS CITY -S1-2IP TITLE DELETE 31. TITLE Change Addition Addition ANAME SIREET ADDRESS CITY -S1-2IP TITLE ADDRESS ADDITIONS/CHANGES TO THE ADDRESS ADDITIONS/CHANGES TO	"	THE CABLESTE SO IST			Į.	84	City		85 ZiD	Code	
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this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the informatic annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

04/10/98

(305)884-4289