FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000088860 1. Corporation Name OPEN PUBLISHING CORP.

Jun 05 1997 8:00am Secretary of State

- •	e of Business	Mailing Address	0.0.		3	
1508 WHITEHALLA.			1.0. BOX 5163		· ·	
# 304			FORT LAUDERDAR		KE	
	LAUDERDALE, FL3		FL 33	310	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 6584	Applied For
Suite, Apt. #, etc.		Suite Apt. #, etc.			03-0426361	Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	☐ Added to Fees
Ζιp	Country	Zφ	⊢ ¬	untry	8. This corporation has liability for in	
24	[25]	29	30	T		Yes 🔀 No
_	9. Name and Address of Currer			81 Name	10. Name and Address of New Reg	jistered Agent
.6ABP	RIEL ZELDIN			o i inarile		
GABRIEL ZELDIN 1508 WHITEHALL DR. # 3				82 Street Add	dress (P.O. Box Number is Not Acceptable	le)
	LAUDERDALE		7 4	83	· · · · · · · · · · · · · · · · · · ·	
BNI	LHOUGHBALE		- l			
				84 City		FL 85 Zip Code
office or r	egistered agent, or both, in the State	of Florida. Such chang	e was authorize	od by the corpora	rporation submits this statement for the particular submits this statement for the particular statement	urpose of changing its registered
_	m familiar with, and accept the obliga	ations of, Section 607.0	505, Florida Sta	itules.		
SIGNATURE	Signature Typed or printed name of registered age	nt and title if applicable.	(NOTE Registere	ed Agent's gnature requ	virco when reinstating)	DATE
12.	OFFICERS ANI	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	TRESIDENT	DELO	TÉ 11T	nti		Change Addition
NAME	GABRIEL ZELD		121	IMAI		
STREET ADDRESS	ISOR WHITE HA	LL DR.#3	64 138	STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERD	ALE LFL 33	324 140	CITY-ST-ZIP		
TITLE		☐ DELU				☐ Change ☐ Addition
NAME			22 N			
STREET ADDRESS				STREET ADDRESS		
CITY-SI-ZIP TITLE		☐ DELE		CITY-ST-ZIP ITLE :		Change Addytion
NAME			32 N			Change (Aud/tott
STREET ADDRESS				TREET ADORESS		
CITY-ST-ZIP				CHIY-SI-7IP		
TITLE		DEL E				☐ Change ☐ Addilion
NAME		•	4 21	NAME		
STREET ADDRESS				PREFT ADDRESS		
CITY-ST-ZIP			1	CITY - ST - ZIP		
TITLE		☐ DELE	TE 517	ITLE		☐ Change ☐ Addition
NAME			5 2 N	IAME	50000220 -06/12/970100	9775
STREET ADDRESS			538	TREET ADDRESS	-06/12/970100	/502 8
CITY-ST-ZIP				HTY-ST-7IP	***165.00	
TITLE		☐ DELF	TE 61T	nte		Change Addition
NAME			62 N	IMM		مر
STREET ADDRESS			638	TREET ADDRESS		(5)
CITY-ST-ZIP				:TIY - \$1 - ZiP		6/5/9/
 14. I do herek informatio 	by certify that the information supplied in indicated on this annual report or s	t with this filing does no applemental annual rec	ot qualify for the port is true and	exemption state accurate and the	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same legal	. I further certify that the effect as if made under path: that
i am an oi	flicer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee i	empowered to a	execute this repo	ort as required by Chapter 607, Florida St	atutes; and that my name

6ABRIEL ZELDIN, PRESIDENY (25/97