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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000047575 (3)

Z & D IMPORTS, INC. EXPORT DEPARTMENT

Principal Flace of Business Mailing Address					(190/124/ 1/2 Jan 1 projet agin agin agin	Mitte Statt imbit breit en	18) Bill 1881	
4229 N. TAMIA SARASOTA FL		4229 N. TAMIAMI TRAI SARASOTA FL 34234-3						
						3. Date Incorporated or Qualified 06/20/1994 3a. Date of Last Report 04/11/1996		
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	├	Applied For
21		26				65-0503168	 	Not Applicable
Surte, Apt		Suite. Apt. #, etc.	27			6. Certificate of Status Desired		Additional Required
City & Stat	te	City & State				Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip 24	Country 25	Zip 29	30	Country			Yes No	s. 199.032,
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	pistered Agent	
DEV	enyi, zoltan			81	Name			
4229 N. TAMIAMI TRAIL SARASOTA FL 34234			82	Street A	ddress (P.O. Box Number is Not Acceptab	le)		
				83				
				84	City		E1 85 Zip	p Code
office or	registered agent, or both, in the Stat am familiar with, and accept the obli-	e of Florida Such change w gations of, Section 607.0505	as author , Florida S	ized by Statutes	the corp	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of changing of the appointment a	its registered as registered
ļ.,	Signature, typed or printed name of registered a	gent and the if applicable		3.	nt signature	required when reinstating) ADDITIONS/CHANGES TO OFFIC		IRS IN 12
12.	P	DELETE		.1 TITLE	····	ADDITIONS/OFFARGES TO OFFICE	Change	
NAME	DEVENYI, ZOLTAN	Lind V		2 NAME			— ·	_
STREET ADDRESS	4229 N. TAMIAMI TRAIL			.3 STREET	ADDRESS			
CITY-SI-ZIP	SARASOTA FL			.4 CITY - S	1			
TITLE	VP	DELETE		.1 TOLE			☐ Change	e Addition
NAME	ERSEK, VILMOS		2	.2 NAME	1			
STREET ADDRESS	4229 N. TAMIAMI TRAIL		2	.3 STREET	ADDRESS			
CITY- ST-ZIP	SARASOTA FL		2	4 CITY-S	ST-ZIP			
TITLE		DELETE.	3	.1 TITLE			Change	e Addition
NAME:			3	.2 NAME				
STREET ADDRESS			3	3 STREET	ADDRESS			
CITY-ST-ZIF		T becare		4. CITY - 8	ST-ZIP		TT 65	e Addition
TifLE		☐ DELETE		1 TITLE			Change	, FT VOOIIION
NAME				2 NAME	*********			
STREET ADDRESS				3 STREET				
CHTY - ST - ZIP		DELETE		4 CITY-S	1 - ZIP		Change	e Addition
1ITLE		ויין טנונונ		1 TITLE		·	L., Gridinge	A MODITION
NAME				i.2 NAME	100000			
STREET ADDRESS				3 STREET		••		
CHY-ST-ZIP		☐ DELETE		A CITY-S	I - ZIP		Change	e Addition
TITLE		☐ VELETE		S.1 TITLE			i naigt	• Montoli
NAME			6	3.2 NAME				

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

LUCAU DELLA DE PRINTED NAME DE SIGNINO DESIGNADO DE DISECTOR

April 2, 1997

941/351-7578

Daytime Phone #

FILED

Apr 08 1997 8:00am

Secretary of State