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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 29 1997 8:00am

Secretary of State

DOCUMENT # P9400063331 (0)

ZINA CARIBBEAN INC.

Principal Place of Business Mailing Address				T 14011001 110 \$5111 DESET OUTS BASIS BASIS BEING BISE STIDE SILES SILES SILES SILES SILES SILES SILES SILES S			
11801 SW 100 MIAMI FL 3317		11801 SW 100 AVENUE MIAMI FL 33176-4124					
					3. Date Incorporated or Qualified 08/29/1994	3a. Date of Las 06/21/199	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26				Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	7(p	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	Istered Agent	
Previti, Peter, ESQ.				Name			
5825 SUNSET DRIVE SUITE 210			82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33143			83		·		
			_				
1			84	City		FL 85 Z	up Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	itos, the above	re-named cor	poration submits this statement for the putition's board of directors. I hereby accep	rpose of changin	g its registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statuto	y trie corpora es.	morts board or directors, thereby accep	, the appointment	as registeren
SIGNATURE							
12,	Signature, typod or printed name of registered ag	end and title if applicable (NC ID-DIRF CTORS	11 Registiree Ag	jent signature requ	rea when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE.	ODC IN 13
TITLE	P				ADDITIONS/CHANGES TO OFFICE	Chance	
NAME	MAIRS, BEVERLY		1.1 TITLE 1.2 NAME				,-
STREET ADDRESS 11801 SW 100 AVENUE		1.3 STHEET ADDRESS		1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33176	1.4 C(1) Y - S1 - ZIP		S1-7IP			
TITLE	VP	☐ DELFTE	DELETÉ 21 TITLE			☐ Chang	ge Addition
NAME	VASSALL, MONTROSE	2.7 NAME					
STREET ADDRESS	11801 SW 100 AVENUE		2 3 STREE	1 ADDRESS			,
CITY-ST-ZIP	MIAMI FL 33176		2 4 Cily	\$1-ZIP			
TITLE	VP DELETE		3 1 TITLE	İ		☐ Chang	ge 🔲 Addition
NAME STREET ADDRESS	MAIRS, RALSTON 11801 SW 100 AVENUE		3.2 NAME	7 405 DE 00			
CITY-ST-ZIP	MIAMI FL 33176			T ADDRESS			
TITLE	ST	DELETE	37 CHY-	81-2P		Chang	e Addition
NAME	VASSAL, JACQUELINE		4. 2 NAMI		_ ,		
STREET ADORESS	DORESS 11801 SW 100 AVENUE			T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33176		4.4 CHY-	1			
TITLE			5 1 11111		Change Addition		
NAME			52 NAME				
STREET ADDRESS			53 STREE	i address			
CITY-ST-ZIP			54 CITY-	ST - 7HP			
TITLE		DETETE	6111111			Chang	ge 🔲 Addition
NAME			62 NAME				
STREET ADDRESS			63 STREE	LADDRESS			

6.4 City-St-ZIP

14. I do hereby certify that the information supplied with the filting 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 supplient and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or their director empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 puhanged, or on an attachment with an address.

WALLET BUTY SAND