

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Candra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **P94000068283 (8)**

1. Corporation Name  
**BRAVO ZULU CORPORATION**

95 MAY -1 PM 9: 27.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**780 NORTHWEST 106TH AVENUE MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **09/16/1994** 3a. Date of Last Report **N.A.**  
4. FEI Number **65-0520475** Applied For  Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**THE LAW FIRM OF LAWRENCE J. SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent  
B1 Name **CUSSIANOVICH, VIERA**  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3 **780NW 106AVE.**  
B4 City **MIAMI** FL B5 Zip Code **33172**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE Viera Cussianovich **VIERA CUSSIANOVICH (D.)** 4/19/95  
(Type, print, or stamped name of person or corporation) (NOTE: Registered agent signature required when registering.) (DATE)

12. OFFICERS AND DIRECTORS

|                 |                                   |
|-----------------|-----------------------------------|
| TITLE           | <b>P</b>                          |
| NAME            | <b>CUSSIANOVICH, MIRKO C</b>      |
| STREET ADDRESS  | <b>780 NORTHWEST 106TH AVENUE</b> |
| CITY - ST - ZIP | <b>MIAMI FL 33172</b>             |
| TITLE           |                                   |
| NAME            |                                   |
| STREET ADDRESS  |                                   |
| CITY - ST - ZIP |                                   |
| TITLE           |                                   |
| NAME            |                                   |
| STREET ADDRESS  |                                   |
| CITY - ST - ZIP |                                   |
| TITLE           |                                   |
| NAME            |                                   |
| STREET ADDRESS  |                                   |
| CITY - ST - ZIP |                                   |
| TITLE           |                                   |
| NAME            |                                   |
| STREET ADDRESS  |                                   |
| CITY - ST - ZIP |                                   |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |  |
|--------------------|--|
| 11 TITLE           | <b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME            | <b>CUSSIANOVICH, VIERA</b>   |
| 13 STREET ADDRESS  | <b>780 NW 106 AVE.</b>   |
| 14 CITY - ST - ZIP | <b>MIAMI FL. 33172</b>   |
| 21 TITLE           | <b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME            | <b>CUSSIANOVICH, CESAR</b>   |
| 23 STREET ADDRESS  | <b>780 NW 106 AVE.</b>   |
| 24 CITY - ST - ZIP | <b>MIAMI FL. 33172</b>   |
| 31 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| 32 NAME            |  |
| 33 STREET ADDRESS  |  |
| 34 CITY - ST - ZIP |  |
| 41 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| 42 NAME            |  |
| 43 STREET ADDRESS  |  |
| 44 CITY - ST - ZIP |  |
| 51 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| 52 NAME            |  |
| 53 STREET ADDRESS  |  |
| 54 CITY - ST - ZIP |  |
| 61 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| 62 NAME            |  |
| 63 STREET ADDRESS  |  |
| 64 CITY - ST - ZIP |  |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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 a attachment with an address.

SIGNATURE: MIRKO CUSSIANOVICH 4/19/95 (800)554-7934  
(Type and typed or printed name of signing officer or director) (Date) (Phone (Area #))