FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 19 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075792

1. Corporation Name: MADISON ESTATES INTERNATIONAL, INC.

Principal Place of Business: 1170 NE 191 STREET, A-22 NORTH MIAMI BEACH, FL 33179

Mailing Address: 4045 SHERIDAN AVE SUITE 123 MIAMI BEACH, FL 33140

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1170 NE 191 STREET	26 4045 SHERIDAN AVE
Suite, Apt. #, etc. 22 A-22	Suite, Apt. #, etc. 27 SUITE 123
City & State 23 NORTH MIAMI BEACH, FL	City & State 28 MIAMI BEACH, FL
Zip 24 33179 — County 25 DADE	Zip 29 33140 — County 30 DADE

3. Date of Incorporation or Qualification: 10/12/94
3a. Date of Last Report: n/a
4. FEI Number: [X] 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. 199.032, Florida Statutes. [ ] Yes [X] No

9. Name and Address of Current Registered Agent

FLORIAN ZGUNEA
4045 SHERIDAN AVE, SUITE 123
MIAMI BEACH, FL 33140

10. Name and Address of New Registered Agent

81 Name: FLORIAN ZGUNEA
82 Street Address (P.O. Box Number is Not Acceptable): 4045 SHERIDAN AVE SUITE 123
83
84 City: MIAMI BEACH FL 85 Zip Code: 33140

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 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 607.0505, Florida Statutes.

SIGNATURE [signature] Date: 3/26/95

12. OFFICERS AND DIRECTORS — (blank)

4/19/95 NB

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	Title	Name	Street Address	City-St-Zip	Change/Addition
1	D/C	MARLENE ZGUNEA	1170 NE 191 STREET, A-22	NORTH MIAMI BEACH, FL 33179	[X] Addition
2	T	AUREL ZGUNEA	1170 NE 191 STREET, A-22	NORTH MIAMI BEACH, FL 33179	[X] Addition
3	D/M	FLORIAN ZGUNEA	4045 SHERIDAN AVE. SUITE 123	MIAMI BEACH, FL 33140	[X] Addition
4					[ ] Change [ ] Addition
5					[ ] Change [ ] Addition
6					[ ] Change [ ] Addition

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 119.07(1)(a), 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: [signature] 3/26/95 (305) 945-9167
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #