

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #

P94000080524

1. Corporation Name

ZERO ONE INTERNATIONAL CORP.

Principal Place of Business

Mailing Address (SAME)

7955 NW. 12TH STREET
SUITE 109
MIAMI, FLORIDA 33126

3. Date Incorporated or Qualified

11/2/94

3a. Date of Last Report

11/2/96

2. Principal Place of Business

2a. Mailing Address

21 7955 NW. 12TH ST.

26 7955 NW. 12TH ST.

4. FEI Number

65-0531007

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$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

10. Name and Address of New Registered Agent

81 Name PETER EDELSTEIN

82 Street Address (P.O. Box Number is Not Acceptable)
7955 NW 12TH STREET

83 SUITE 109

84 City MIAMI

FL

85 Zip Code 33126

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when re-instating)

PETER EDELSTEIN, PRES.

DATE

2/23/96

12. OFFICERS AND DIRECTORS

[] DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

[] DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P. PETER EDELSTEIN (PRESIDENT) Change X Addition

1.2 NAME 7955 NW 12TH STREET STE 109

1.3 STREET ADDRESS MIAMI, FLORIDA 33126

1.4 CITY-ST-ZIP

[] Change [] Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

[] Change [] Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

[] Change [] Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

[] Change [] Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

[] Change [] Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 119.07(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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER EDELSTEIN, PRES. 2/23/96 305/

DATE

DATE OF FILING

CR2E034 (12/95)