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 # P96000044537 (4)

ZURICH PRIMARY HOLDINGS CORPORATION

Principal Place of Business 155 SOUTH MIAMI AVENUE PENTHOUSE MIAMI FL 33130		Mailing Address 155 SOUTH MIAMI AVENUE PENTHOUSE MIAMI FL 33130-1606			1 TEOLINGA IND MANG BANK BANK BOTTLABIN ANNI BIBN SINDS BUSAN HILL FOOL SENS				
MINMITE OU	11 90	MITMIT (C 0310071000				3. Date Incorporated or Qualified 05/24/1996	3a. [Date of Last F	Report
2, Principal	l Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·			4. FEI Number		A	pplied For
21		26			65-0679610			ot Applicable	
	pt. #. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	K		Additional equired	
City & St 23		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
2ip	Country	Zip	Cou	untry	1	8. This corporation has liability for			s. 199.032,
24	25	29	30	,			Yes		
···	g, Name and Address of Cur	rent Registered Agent		1		10. Name and Address of New Re	gistered	l Agent	
	eller, brian s esq.			81	Name				
155 SOUTH MIAMI AVENUE PENTHOUSE MIAMI FL 33130				82	Street Ad	dress (P.O. Box Number is Not Acceptat	le)		
				83			•••		
				84	City		FI	L	Code
SIGNATURI	Signature typed of purhishmano of registered	agent and title fapproable. (NO	OTE: Registere			orporation submits this statement for the pation's board of directors. I hereby acceptation's when reinstating	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AN		
TOTAL	D DI ALIA WALTO	☐ DELETE	117		i			Change	Addition
NAME	BLAHA, WALTER ss 155 SOUTH MIAM! AVENUE	DENTUNIEC	1.2 N						
STREET ACCIDAGES		reninouse			ADDRESS				
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THIE		L. Detete	2.1 T					change	Addition
NAVE			22 N		400DY00				
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NAME		المرابعة السيبا	3.2 N			· ·			
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City St Ze			34 (CITY-5	ST-ZIP				
THEF		☐ D£LET£	411	_				Change	Addition
NAME			4.21	NAME					
STREET ADDRES	98	•	4.3 S	TREET	ADDRESS				
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STREET ADDRES	SS		538	TREET	ADDRESS	•			
CHIV - 51 - 7F1		A. A. A.			T-ZIP			1 0	
HILE		DELETE	6.1 T					☐ Change	Addition
NAME				IAME					
STREET ADORES	SS		6.3 \$	TREET	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)(1). 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

SIGNATURE:

FILED

May 19 1997 8:00am

Secretary of State