SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000051014 (4)

ZETA MULTIMEDIA, INC.

FILED Jul 23 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					1 1001/1007 1/10 (41/10 0/11)/ 2011/ 07/1/ 07			
10030 N.W. 44 MIAMI FL 331	ITH TERRACE. #302 78	10030 N.W. 44TH TERRACE. #302 MIAMI FL 33178			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report			
Dilected Photo of Physics					06/14/1996 4. FEI Number		1 14	-112-5
2. Principal Place of Business 21 1200 BRICKEL AUS \$1620 22 1200 BRICKEL			as him		65-07087	1 9		plied For it Applicable
Sulte, Apt.		26 1200 BRICKELL INE Suite, Apt. #, etc.						Additional
	20	27 SUITE # 1620			5. Certificate of Status Desired		Fee Re	
City & State		City & State		6. Election Campaign Financing		5.00	May Be	
	MI, FL	28 MIAMI, PL			Trust Fund Contribution			
^{Zip} 331			Cour 30	USA	This corporation owes or has pai Personal Property Tax due June	30. 🗹 Ye	s [angible] No
	9. Name and Address of Current	Registered Agent		ad No.	10. Name and Address of New Re	istered Age	nt	
WLMC REGISTERED AGENTS, INC.				81 Name]
701 BRICKELL AVE. SUITE 2000			Ī	82 Street Add	ress (P.O. Box Number is Not Acceptab	e)		
MIAMI FL 33131				83				
IVIN'T	m 1 E 00 10 1			Od Cau			1 7 7	7-2-
			[B4 City		FL 85	Zip (700 0
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 reinstating) DATE								
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIE	FCTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 111	.E	ABBITTOTOTOTOTOTO		Change	Addition
NAME	TARRIO, JOSE A		1.2 NA	ME				
STREET ADDRESS 10030 N.W. 44TH TERRACE, #302			1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33178		1.4 CIT	Y - ST - ZIP				
TITLE	D	☐ DELETE	2.1 T(T)	.E			Change	☐ Addition
NAME	ASENSIO, BLANCA ROSA R		2.2 NA	···				
STREET ADDRESS	BAILEN, 84			EET ADDRESS				
CITY-ST-ZIP TITLE	08009 BARCELONA, SPAIN		2 4 CII	Y-ST-ZIP			Change	Addition
NAME	•	_ better	3.2 NAM			Ų.	e-migu	C COMMON
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP			1	Y-ST-ZIP				
TITLE		DELETE	4.1 T(T)	.E			Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	5 1 TITL	.E.			Change	Addition
NAME			5.2 NA	ME)				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY-ST-ZIP		T priese		Y-ST-ZIP			0	42000
TITLE		☐ DELETE	6.1 TITL				Change	L_ Addition
NAME			6.2 NAM	1				
STREET ADDRESS				EET AODRESS				
CITY-ST-ZIP			6.4 CITY	/-ST-ZIP				

14. I do hereby certify that the information supplied with this filing 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 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.

7/16/97