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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600056319 (2) ZIBKI F PROCESS SERVICE INC.

FILED Apr 23 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 408 SOUTH ANDREWS AVENUE SUITE 201 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301-2827						
					3. Date Incorporated or Qualified 07/03/1996	3a. Date of Lasi Report
21	lace of Business	2a. Mailing Address	S		4. FET Number 65-0683446	Applied For Not Applica
Sulte, Apt.	#, etc.	Suite, Apt. #, et	c.		5. Certificate of Status Desired	\$8.75 Additiona Fee Required
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	30	ntry	This corporation has liability for Florida Statutes	intangible tax under s. 199.032 ¥yes ☐ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	gistered Agent
71RI	(LE, CAROLYN M			81 Name		
340	8 N.W. 68 COURT LAUDERDALE FL 33309			82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)
гі	DADDEUDATE LE 22208			63		
·						
				64 City		FL 85 Zip Code
11. Pursuant office or r agent. I a	m familiar with, and accept the obli	gations of, Section 607.05	05, Florida Stat	utes.	poralion submits this statement for the ation's board of directors. I hereby acce	
	Signature, typed or printed name of registered a			l Agent signature requ	ured when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	ZIRKLE, CAROLYN M					∐ Change
NAME STREET ADDRESS	408 SOUTH ANDREWS AVE	NI IF 201	1.2 N/	REET ADDRESS		
	FT. LAUDERDALE FL 33301	104, 401				
CITY-ST-ZIP TITLE	VD	☐ D£LE		1Y-S1-ZIP		Change Add
NAME	ZIRKLE, CHARLES J	L. W.C.	27 N		€°.	
STREET ADDRESS	408 SOUTH ANDREWS AVE	NUE. #201	1	REF1 ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33301			11Y - \$1 - ZIP		
TITLE		DELE				Change Add
NAME			3.2 N/	IME]		
STREET ADDRESS			3.3 \$1	REET ADDRESS		
CITY-ST-ZIP			3.4. C	11Y-S1-ZIP		
TITLE		DELET	E 4.1 Tr	ILE		☐ Change ☐ Add
NAME			4.2 N	AME		
STREET ADDRESS			43 ST	REFT ADDRESS		
CITY-ST-ZIP		·····		IY-SI-ZIP		
ŢITLE		☐ DELET				☐ Change ☐ Add
NAME			5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELE		1Y-\$1.7IP		Change Add
TITLE		רין טנוני				□ ruange □ Add
NAME AXECT ADDRESS			6.2 N/			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			64 CI	TY-\$1-7IP		

. I do hereby certify that the information supplied with this fifing 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 accorate 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 reported by Charlier 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

ICHATURE (DEAL W M Zietle (Quelo

1/1/02 524-0080