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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 01 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600061868 (1)

ZIRBERT INVESTMENT CORP.																
Pi	incipal Place	e of Busines	s		Mailing Address						7	E PROBLEMON HAN INDIAN DIREN UNTEN AND IN	i Galil Offic	FILDI HIDDE IDI		
800 WEST HILLSBORO BLVD SUITE 510 DEERFIELD BEACH FL 33441					600 WEST HILLSBORO BLVD SUITE 510 DEERFIELD BEACH FL 33441							DO NOT WRITE IN THIS SPACE				
•	ACEMITEED OF	CHON 1E 33	A1		DEEMILED DEMONTE SOAN						3. Date Incorporated or Qualified					
											0	7/23/1996				
_	Principal Pi	lace of Busin	ness			Mailing Address					4. FE	l Number .				plied For
21	Cuite And H ale				26							65-0709399				l Applicable
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Des			+		dditional quired
23	City & State				City & State						ection Campaign Financingust Fund Contribution				May Be o Fees	
23	Zip	Country						Country	untry		+	is corporation owes or has				
24	,	25			29 30						Pe	rsonal Property Tax due J	une 30.	Yes	_	No.
9. Name and Address of Current Registered Agent											10. Name and Address of New Registered Agent					
	HA:	SIS, THOM	AS A					81		Name						
4081 N FEDERAL HIGHWAY								82	:	Street Address (P.O. Box Number is Not Acceptable)						
SUITE 110 POMPANO BEACH FL 33064								83	+							
	, ,	7 10						84	-	City				85	Zip C	Code
-4.			lana of Caption	- 607.0600		7 44 00 Florida Bunt.			L			thereit this statement for the		-L 00	in no its	vaniotovod
11	office or re agent. I a	egi ste red aç m fa miliar w	ent, or both, in th, and accept	the State of f the obligation	lorida as of,	a Such change was Section 607.0505, F	autho Florida	rized b Statute	y th	ne corporatio	ion's boa	ubmits this statement for the relation of directors. I hereby ac	cept the	appointmer	ng itas i	registered
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Age											ad when rain	(Aniteta	DAT	rF.		
12	2.	Signature, typica		CERS AND D				13.		ang nation of respirator		DITIONS/CHANGES TO OF			TOR	S IN 12
TIT		D	•••			DELETE	1	1.1 TITLE -						Cha	nge	Addition
NA	AME HASIS, THOMAS A				1.2			1.2 NAME								
ST	STREET ADDRESS 4081 N FEDERAL HIGHWAY			GHWAY STE	TE 110 1.3:			1.3 STREET ADDRESS								
CI	Y-ST-ZIP	<u>POMPAI</u>	NO BEACH F	L 33064				1.4 CITY-	S1-	ZIP						
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	ME							2.2 NAME					\$			
_	REET ADDRESS							2.3 STREE		ŀ						
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	ME					otten		3.2 NAME							Br.	71331(1311
	REET ADDRESS							3.3 STREE		SZEBOO						
_	Y-ST-ZIP							3.4. CITY-								
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NA	ME							4. 2 NAME								
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TIT	LE					☐ DELETE	:	5.1 TITLE						☐ Cha	nge	Addition
NA	ME							5.2 NAME								
ST	REET ADDRESS							5 3 STREET	T AD	DRESS						
-	Y-ST-ZIP	· <u>-</u>				DELETE		5.4 CITY - S	ST - 2	ZIP				D. C.		Andisia-
TIT						☐ DELE te		6.1 TITLE						☐ Cha	nge	Addition
	ME DOCK ADDDESCE							6.2 NAME		DDECC						
	REET ADDRESS							B.3 STREET								
_	Y-ST-ZIP I. I hereby c	ertify that th	e information s	upplied with ti	his fili	ing does not qualify	for the	exemp	otio	n stated in S	Section 1	19.07(3)(i), Florida Statute	s. I furthe	r certify tha	t the	information
	Indicated officer or of	on this annu dir ect or of th	al report or sup le corporation of	oplemental an or the receiver	nual i r or tri	report is true and ac	ccurate	and th	nat	my signature	re shall h	ave the same legal effect a Chapter 607, Florida Statut	as if made	e under oatl	h; tha	tlam an

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