

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000075213 (4)

1. Corporation Name

ZAR ENTERPRISES, INC.

Principal Place of Business

4880 N.W. 157TH STREET  
201 S. BISCAYNE BLVD., SUITE 1970  
MIAMI FL 33014  
US

Mailing Address

4880 N.W. 157TH ST  
201 S. BISCAYNE BLVD., SUITE 1970  
MIAMI FL 33014  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/10/1996

4. FEI Number

65-0713986

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

25 Country

24

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

29

30

9. Name and Address of Current Registered Agent

EISENBERG, JAY  
4880 N.W. 157TH STREET  
SUITE 1970  
MIAMI FL 33014

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	ROBINSON, JEFFREY	
STREET ADDRESS	2895 LUCKIE RD	
CITY - ST - ZIP	WESTON FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	EISENBERG, JAY	
STREET ADDRESS	139 CAMERON COURT	
CITY - ST - ZIP	WESTON FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	EISENBERG, ARNOLD	
STREET ADDRESS	320 E. 46TH ST., #22A	
CITY - ST - ZIP	NEW YORK NY	

TITLE	D	<input type="checkbox"/> DELETE
NAME	ZAMBITO, STEVEN	
STREET ADDRESS	280 OTTER ROCK COURT	
CITY - ST - ZIP	GREENWICH CT	

TITLE	D	<input type="checkbox"/> DELETE
NAME	ZLOT, BARRY	
STREET ADDRESS	3073 SHORE ROAD	
CITY - ST - ZIP	BELLMORE NY	

TITLE	D	<input type="checkbox"/> DELETE
NAME	ZLOT, WARREN	
STREET ADDRESS	250 E. 63RD ST., 21C	
CITY - ST - ZIP	NEW YORK NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	ZLOT, BARRY
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I 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.

SIGNATURE:

*Warren Zlot*

1-800-333-0699

CR2E034 (10/97)