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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P96000103113 (2)

1	MENT # P960 RZA GROUP, INC.	000103113	(2)		
Principal Place of Business Mailing Address					
9737 DORAL BLVD. 9737 DORAL BLVD. SUITE 292 SUITE 292 MIAMI FL 33178 MIAMI FL 33178					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1996
2. Principal Place of Business 2a. Mai			Mailing Address		4. FEI Number Applied For
21		26	26		65-0756355 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
27 27					Fee Required
City & Stat	te	 -1 ΄	City & State		6. Election Campaign Financing \$5.00 May Be
23	Country	28			Trust Fund Contribution LJ Added to Fees
Zip 24	Country 25	Zip	30	untry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes
241	9. Name and Address of Cu	29 urrent Registered Agent	[30]	T	10. Name and Address of New Registered Agent
AE	RZA, RALPH			81 Name	
9921 N.W. 51ST LANE MIAMI FL 33178				82 Street	t Address (P.O. Box Number is Not Acceptable)
				84 City	FL 85 Zip Code
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 reinstaling) DATE					
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VP	☐ D€	.ETE 1.11	INTLE	Change Addition
NAME	ARZA, ERIS N		1.21	NAME	
STREET ADDRESS	9921 N.W. 51 LANE		1.3 5	Street address	
CITY-ST-ZIP	MIAMI FL 33196			CITY-ST-ZIP	
TITLE	VP	☐ DF	•	TITLE	Change L Addition
NAME	ARZA, NIDIA E			NAME	
STREET ADDRESS	1527 N.W. 8 STREET		1	STREET ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL 33125	☐ DE		CITY-ST-ZIP	Change Addition
NAME	ZAYAS, ERIS			NAME	Cupilée Tantini
STREET ADDRESS	10809 N.W. 7 STREET, #	¥11		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172	•••		CITY-ST-ZIP	
TITLE	S	DE		TITLE	Change Addition
NAME	RODRIGUEZ, ROLANDO		4.2	NAMÉ	
STREET ADDRESS	14457 S.W. 83RD STREE	ī		TREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33183		4.4 (CITY-ST-ZIP	
TITLE		DE:	.ETE 5.1 T	ITLE	Change Addition
NAME			5.2	IAME	
STREET ADDRESS			535	STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		☐ DEL	ETE 6.1 T	ITLE	Change Addition
NAME			621	iam <u>e</u>	
STREET ADDRESS			6.3 9	TREET ADDRESS	

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.

FILED

Apr 30 1998 8:00am

Secretary of State