

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000027008 (6)

1. Corporation Name

MZLTV CORP.

Principal Place of Business

3770 CHASE AVE.  
MIAMI BEACH FL 33140

Mailing Address

3770 CHASE AVE.  
MIAMI BEACH FL 33140

2. Principal Place of Business

21 333 41 Street

Suite, Apt. #, etc.

22 Suite 900

City & State

23 Miami Beach, FL

Zip

24 33140

Country

25 USA

2a. Mailing Address

26 333 41 Street

Suite, Apt. #, etc.

27 Suite 900

City & State

28 Miami Beach, FL

Zip

29 33140

Country

30 USA

9. Name and Address of Current Registered Agent

LEVEY, JEFFREY E  
3770 CHASE AVE.  
MIAMI BEACH FL 33140

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 [ ] DELETE

NAME DARDASHTI, DAVID

STREET ADDRESS 3770 CHASE AVE.

CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE D [ ] DELETE

NAME BRONSTEIN, HILLEL

STREET ADDRESS 16 WEST 38TH STREET

CITY-ST-ZIP NEW YORK NY 10018

TITLE [ ] DELETE

NAME [ ] DELETE

STREET ADDRESS [ ] DELETE

CITY-ST-ZIP [ ] DELETE

TITLE [ ] DELETE

NAME [ ] DELETE

STREET ADDRESS [ ] DELETE

CITY-ST-ZIP [ ] DELETE

TITLE [ ] DELETE

NAME [ ] DELETE

STREET ADDRESS [ ] DELETE

CITY-ST-ZIP [ ] DELETE

TITLE [ ] DELETE

NAME [ ] DELETE

STREET ADDRESS [ ] DELETE

CITY-ST-ZIP [ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [ ] Change [ ] Addition

1.2 NAME 000002639490--8

1.3 STREET ADDRESS -09/15/98--01035--006

1.4 CITY-ST-ZIP \*\*\*\*\*550.00 \*\*\*\*\*550.00

2.1 TITLE [ ] Change [ ] Addition

2.2 NAME 000002639490--8

2.3 STREET ADDRESS -09/15/98--01035--007

2.4 CITY-ST-ZIP \*\*\*\*\*8.75 \*\*\*\*\*8.75

3.1 TITLE [ ] Change [ ] Addition

3.2 NAME [ ] Change [ ] Addition

3.3 STREET ADDRESS [ ] Change [ ] Addition

3.4 CITY-ST-ZIP [ ] Change [ ] Addition

4.1 TITLE [ ] Change [ ] Addition

4.2 NAME [ ] Change [ ] Addition

4.3 STREET ADDRESS [ ] Change [ ] Addition

4.4 CITY-ST-ZIP [ ] Change [ ] Addition

5.1 TITLE [ ] Change [ ] Addition

5.2 NAME [ ] Change [ ] Addition

5.3 STREET ADDRESS [ ] Change [ ] Addition

5.4 CITY-ST-ZIP [ ] Change [ ] Addition

6.1 TITLE [ ] Change [ ] Addition

6.2 NAME [ ] Change [ ] Addition

6.3 STREET ADDRESS [ ] Change [ ] Addition

6.4 CITY-ST-ZIP [ ] Change [ ] Addition

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

APPROVED  
AND  
FILED

98 SEP 16 AM 10:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1997

4. FEI Number

65-0753545

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

10. Name and Address of New Registered Agent

CR2E034 (5/98)

9-10-98 (305) 531-6888