2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Mar 15, 2004 08:00 AM DOCUMENT # P97000048043 **Secretary of State** ZADEN PROPERTY CORPORATION Principal Place of Business Mailing Address 4318 N.E. 23RD AVE. FT. LAUDERDALE FL 33308 4318 N.E. 23RD AVE. FT. LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0764454 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZADEN, <del>RICHARD</del> Street Address (P.O. Box Number is Not Acceptable) 1749 N.E. 26TH ST. FT. LAUDERDALE FL 33305 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Rousstered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DP TITLE Delete TIRLE ☐ Change Addition MAINE ZADEN, MARIAN NAME U00000087276 03/15/04-80004-022 150.00 STREET ADDRESS 4318 N.E. 23RD AVE. STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33308 CITY-ST-ZIP DS Defete TITLE Change Addition ZADEN, MARK NAME \*18885 STREET ADDRESS 4836 N.E. 23RD AVE, SUITE 19 STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33308 CXTY-ST-ZIP TITLE DVT ☐ Delote TITLE Change Addition NAME ZADEN, JOSEPH M. D.M. MARKE STREET ADDRESS 4318 N.E. 23RD AVE. STREET ADDRESS CSTY - ST - ZSP FT. LAUDERDALE FL 33308 CITY-ST-78P TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-23P THILE Delete TITLE Change Addition MARKE NAME STREET ADDRESS STREET ADORESS DITY - ST-ZIP ETTY-ST-ZEP TITLE ☐ Delete BILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 12. Thereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

FHED