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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000063601 (3)

ZUZANA TON INCORPORATED

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address									
5901 CAMINO DEL SOL #206		5901 CAMINO DEL SOL #206								
BOCA RATON FL 33433		BOCA RATON FL 33433					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified			
							07/22/1997			
2. Principal Place of Business		2a. Mailing	Address				4. FEI Number			Applied For
21	26					65-0772948		- 	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.					0 0 1 7 1 1 10			Additional	
22	27					5. Certificate of Status Desired	Ш		Required	
City & State	City & State					6. Election Campaign Financing			0 May Be	
		28				Trust Fund Contribution			d to Fees	
	Country		Zip Cou				8. This corporation owes or has pain	d the curr	ent vear I	ntangible
24 25	25		29 30				Personal Property Tax due June :	_	_ ~	□No
	Address of Current F	legistered A	gent	1			10. Name and Address of New Reg	Istered A	gent	
TON, Z UZANA				81	1	Name				
5901 CAMINO DE		82 Street Ad			Stroot Addroi	ddress (P.O. Box Number is Not Acceptable)				
BOCA RATON FL					Medi Addies	ss (i .o. box Number is Not Acceptable	6)			
•	55165			83		,			,	
				-	Ļ				T I	
				84	٦ ا	Dity		FL	85 Zip	o Code
11. Pursuare to the provisions	of Sections 607.0502 a	nd 607.1508,	Florida Statut	es, the above	e-na	amed corpo	ration submits this statement for the pu	irnose of	changing	its registered
office or registered agent,	or both, in the State of nd accept the obligation	Florida Such	i change was a	authorized by	y th	e corporatio	n's board of directors. I hereby accept	the appo	intment a	is registered
•	no two specific on igane	one or, executor	1 007.0300, 1 10	AIOD OLLIGIO	J					1
SIGNATURE Signature, typed or pro	nted name of registrated agent a	nd trie if applicable	e (NOT	E Registered Agr	ent si	signature required	(when reinstating)	DATE		i
12.	OFFICERS AND D	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTO	DRS IN 12
TITLE PLCS:	Nr		DELETE	1.1 TITLE	·				Change	Addition
NAME ZUZANA	, TBN, ,	1		1.2 NAME						-
STREET ADDRESS 5901 C.A	mino Del S	ار 	e e	1.3 STREET	T ADD	DRESS				
CITY-ST-ZIP BOCA R	ALON PL	33433	3	1.4 CITY - 9	ST - ZI	ie				
TITLE			DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME		ļ				
STREET ADDRESS				2.3 STREET	T ADD	DRESS				
CITY-ST-ZIP				2. 4 CITY-	ST-7	71P				
TITLE			DELETE	3.1 TITLE		-	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				3.2 NAME					•	_
STREET ADDRESS				3.3 STREET	F ADD	DRESS				1
CITY-ST-ZIP				3.4. CITY-1						
TITLE			DELETE	4.1 TITLE			· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				4. 2 NAME					- •	
STREET ADDRESS				4.3 STREET		ORESS				
CITY-SY-ZIP				4.4 CITY- S						
TITLE			DELETE	51 TiTLE	J. 2.	"			Change	Addition
NAME		,		5.2 NAME				'		
STREET ADDRESS				5.3 STREET	[ለቦሶ	DRESS				
										j
CITY-\$T-ZIP			DELETE	5.4 CITY - S 6.1 TITLE	21-6	ır			Change	Addition
NAME		'				1		'		- NOIIION
				6.2 NAME		ancee				ľ
STREET ADDRESS				6.3 STREET		1				
CITY-ST-ZIP	and the second second	Alla Citara de s		6.4 CITY - S	31 - ZI	IP I				

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 suppliemental 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 expowered 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 hodress