

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

FILED
Jun 22 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 # P97000090722 (4)
 1. Corporation Name
ZETA CORPORATION



Principal Place of Business 6805 SUNDANCE TRAIL RIVERSIDE CA 92506	Mailing Address 6805 SUNDANCE TRAIL RIVERSIDE CA 92506
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/21/1997	
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	25. Suite, Apt. #, etc.	26. City & State
				27. 219-1628 W 1ST AVE	28. VANCOUVER B.C.
				29. V6J-1G1	30. CANADA
4. FEI Number 58-2349413				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BOULEVARD #211 PALM BEACH GARDENS FL 33418			10. Name and Address of New Registered Agent		
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)		83.	84. City	85. Zip Code
				FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FINKELSTEIN, KEN	1.2 NAME	
STREET ADDRESS	6805 SUNDANCE TRAIL	1.3 STREET ADDRESS	
CITY-ST-ZIP	RIVERSIDE CA 92506	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT/DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAMACHE, DAVID	2.2 NAME	DAVID GAMACHE
STREET ADDRESS	6805 SUNDANCE TRAIL	2.3 STREET ADDRESS	6805 SUNDANCE TRAIL
CITY-ST-ZIP	RIVERSIDE CA 92506	2.4 CITY-ST-ZIP	RIVERSIDE, CALIFORNIA 92506
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	SECRETARY, TREASURER, DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	SINGH, SOPINDER
STREET ADDRESS		3.3 STREET ADDRESS	305-5525 INMAN AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	BURNABY, B.C. V5H-2M2
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	WEAVER, TODD
STREET ADDRESS		4.3 STREET ADDRESS	2000 SOUTH OCEAN, LANE #11
CITY-ST-ZIP		4.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33316
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	COPLEY, FRANK
STREET ADDRESS		5.3 STREET ADDRESS	68 WILLIAMS ST
CITY-ST-ZIP		5.4 CITY-ST-ZIP	PORT MOODY, B.C. V3H-2R5
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	800002568016
STREET ADDRESS		6.3 STREET ADDRESS	-06/22/98-0108P-024
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

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: _____ **Ken Finkelstein** 604-734-8227

CR2E034 (10/97)