


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

FILED
May 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S49550 (4)					
1. Corporation Name ZARCO CORPORATION					

Principal Place of Business 512 N.W. 87 TERR. CORAL SPRINGS FL 33071	Mailing Address 512 N.W. 87 TERR. CORAL SPRINGS FL 33071-7181
--	---



2. Principal Place of Business 21 6105 WALDWICK CIRCLE Suite, Apt. #, etc.		2a. Mailing Address 26 6105 WALDWICK CIRCLE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 04/29/1991		3a. Date of Last Report 03/06/1996	
22 City & State 23 DELRAY BEACH, FLORIDA Zip Country		27 City & State 28 DELRAY BEACH, FLORIDA Zip Country		4. FEI Number 65-0290392		Applied For Not Applicable	
24 33484 2 PALM BEACH		29 33484 30 PALM BEACH		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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent SMUKLER, ROBERT 512 N.W. 87 TERR. CORAL SPRINGS FL 33071				10. Name and Address of New Registered Agent			
				81 Name ZEIMA Z. SMUKLER			
				82 Street Address (P.O. Box Number is Not Acceptable) 6105 WALDWICK CIRCLE			
				83			
				84 City DELRAY BEACH FL 85 Zip Code 33484			

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. *Zeima Z. Smukler* **ZEIMA Z. SMUKLER, DIRECTOR** **04/01/97**

SIGNATURE *Zeima Z. Smukler* (NOT: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE D SMUKLER, ROBERT XX DELETE				1.1 TITLE D ZEIMA Z. SMUKLER XX Change <input type="checkbox"/> Addition			
1.2 NAME 512 N.W. 87 TERR.				1.2 NAME 6105 WALDWICK CIRCLE			
1.3 STREET ADDRESS CORAL SPRINGS FL 33071				1.3 STREET ADDRESS DELRAY BEACH, FL. 33484			
1.4 CITY-ST-ZIP				1.4 CITY-ST-ZIP			
2.1 TITLE <input type="checkbox"/> DELETE				2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME				2.2 NAME			
2.3 STREET ADDRESS				2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP				2.4 CITY-ST-ZIP			
3.1 TITLE <input type="checkbox"/> DELETE				3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME				3.2 NAME			
3.3 STREET ADDRESS				3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP				3.4 CITY-ST-ZIP			
4.1 TITLE <input type="checkbox"/> DELETE				4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME				4.2 NAME			
4.3 STREET ADDRESS				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
5.1 TITLE <input type="checkbox"/> DELETE				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME				5.2 NAME			
5.3 STREET ADDRESS				5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP				5.4 CITY-ST-ZIP			
6.1 TITLE <input type="checkbox"/> DELETE				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME				6.2 NAME			
6.3 STREET ADDRESS				6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 *Zeima Z. Smukler* **ZEIMA Z. SMUKLER** **04/01/97** **561-**

CR2E034 (9/96)