FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (3)**DOCUMENT #** 1. Corporation Name C. & Z. ENTERPRISES GROUP, INC. Mailing Address Principal Place of Business 8345 NW 68 STREET 8345 NW 68 STREET MIAMI FL 33166 MIAMI FL 33166 3a. Date of Last Report 3. Date incorporated or Qualified 03/28/1995 11/15/1991 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0295146 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees Trust Fund Contribution 23 8. This corporation has liability for intangible tax under s. 199.032, Country 245 Zici Florida Statutes Yes No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ZAMBRANO, MARTHA E. 82 8345 N.W. 68TH ST. 83 MIAMI FL 33166 Zip Code 85 84 City 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, of both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am fanifiar with, applying the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am fanifiar with, applying the purpose of change was authorized by the corporation's board of directors. SIGNATURE DATE (mysered a politic distribution) also INSITE RESISTANCE A FIRESIUM PO ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 HULE TITLE 1.2 NAME ZAMBRANO, MARTHA E. NAME 8060 N.W. 191ST ST 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL 14 CITY - 5" - ZiP CITY - ST - ZIP Change ne fibbA DELETE 2 1 THUE TITLE 2.2 NAME NAME 2.3 STHEET ADDRESS STREET ADDRESS 2.4 City - \$1 - ZiP CITY - \$1 - 712 Addition Change DELETE 3 1 DUE. TATLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS. 3.4 CITY - ST - ZiF CITY - ST - ZIP ☐ Addition □ D€LETE 4 1 TiTuE TITLE 4.2 NAMÉ NAME 700001818227 -05/13/96--01031--005 4.3 STREET ADDRESS STREET ADDRESS 4.4 City St - ZiF ***200.00 CITY - S' - ZIP Addition Change DELETE 5.1 ₩.€ TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 GiTY - ST 7-P CITY-ST-ZIP Addition Change . [] DELFIE 6 1 TITE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 Cilly - St. 2 F 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 carry that I am an officer or orientiate of the special on obtain server or trusted en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SG-5-1-96

CR2E034 (12/95)