2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** K72038 1. Entity Name

FILED Mar 19, 2003 8:00 am Secretary of State 03-19-2003 90111 040 ***150.00

| | ZI ASSOC | IATES INC. | | | | | 03-19-2003 9011 | 11 040 130 | |
|---|--|--|---------------------------|---|--|---------------------------------------|---|--|---|
| Principal Place of Business 7000 W. PALMETTO PARK RD #302 BOCA RATON FL 33433-3430 US 2. Principal Place of Business | | | 7000 #30 BOC US | Mailing Address 7000 W PALMETTO PARK ROAD #302 BOCA RATON FL 33433-3430 US 3. Mailing Address | | | | | |
| | _ | <u>-</u> | | | | | | | |
| Suite, Ap | i. #, etc. | | Su | ite, Apt. #, etc. | | | ☐ CHECK HERE IF M | AKING CHANGE | S |
| City & State | | | Cit | City & State | | | 4. FEI Number 65-0106627 Applied For | | |
| Zip | | Country | Zip |) T | Country | 5 Ce | ertificate of Status Desired | ¢0.75 . | Not Applicable dditional |
| | - 6. Name | and Address of Cu | urrent Register | red Agent | | | me and Address of New Regist | ☐ Fee Requi | |
| | | | | The second second | *Name* | 7. Na | ine and Address of New Regist | tered Agent | ~ ~ |
| IANNAZZI, CHERYLE M. 21023 SHADY VISTA LANE BOCA RATON FL 33428 | | | | | Street Addr | ess (P.O. Box | Number is Not Acceptable) | | |
| DOUA NA | ATON FL 33 | 420 | | | City | · · · · · · · · · · · · · · · · · · · | | ······································ | |
| 0 The | | | | | City | <u>-</u> - | <u> </u> | FL Zip Co | |
| the obliga | e named entity itions of regist | y submits this staten ered agent. | ent for the pur | pose of changing its r | registered office or reg | istered agen | t, or both, in the State of Florida. | l am familiar with | , and accept |
| | | | | | | | | | |
| SIGNATURE | | | | | | | | | |
| SIGNATURE | | or printed name of registere | d agent and title if ap | plicable. (NOTE: | Registered Agent signature re | quired when reinst | tating) (| DATE | |
| Afte | Signature, typed FILE NOW!! or May 1, 200 | or printed name of registered! FEE IS \$150.0 3 Fee will be \$55 6 Florida Department | 0 0.00 | plicable. (NOTE: | Registered Agent signature re | quired when reinst | 9. Election Campaign Financin Trust Fund Contribution. | ng \$5. 0 | 00 May Be |
| Afte Make Chec | Signature, typed FILE NOW!! er May 1, 200 k Payable to | ! FEE IS \$150.0 3 Fee will be \$55 6 Florida Departm | 0 0.00 | DRS | Registered Agent signature re | | 9. Election Campaign Financin | ng \$5. | d to Fees |
| Afte Make Chec | Signature, typed FILE NOW!! or May 1, 200 k Payable to PST IANNAZZI, | ! FEE IS \$150.0 33 Fee will be \$55 5 Florida Departm OFFICERS CHERYLE M. HADY VISTA LN. | 0 0.00 ent of State | | | | Election Campaign Financin Trust Fund Contribution. | ng \$5. | d to Fees |
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