

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034369

FILED
Apr 21, 2006
Secretary of State

Entity Name: ZEPPLIN HURRICANE SERVICES, INC.

Current Principal Place of Business:

15665 NORTHWEST 5TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

403 SW 148TH AVE
APT 6B
PEMBROKE PINES, FL 33027

Current Mailing Address:

15665 NORTHWEST 5TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

403 SW 148TH AVE
APT 6B
PEMBROKE PINES, FL 33027

FEI Number: 04-3629179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 CORAL WAY
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: PEAKE, JOHN C
Address: 15665 NORTHWEST 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: PEAKE, JOHN C
Address: 403 SW 148TH AVE, APT 6B
City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN PEAKE

PSTD

04/21/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date