2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000007778

ZAMPIERI, NORA

MIAMI, FL 33166 US

7210 N.W. 74TH AVENUE

Name:

Address:

City-St-Zip:

Entity Name: NMZ ENTERPRISES INC.

FILED Apr 30, 2008 Secretary of State

y		rent mode into.		
Current Principal Place of Business:			New Principal Place of Business:	
7210 N.W. MIAMI, FL	74TH AVENU 33166 US	E		
Current Mailing Address:			New Mailing Address:	
7210 N.W. MIAMI, FL	. 74TH AVENU 33166 US	E		
FEI Number	: 36-4601210	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
ZAMPIERI 7210 N.W. MIAMI, FL	. 74TH AVENU	E		
	named entity : e of Florida.	submits this statement for the բ	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE:			
	Electror	nic Signature of Registered Age	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DIR () ZAMPIERI, NO 7210 N.W. 74T MIAMI, FL 331	H AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PRES () ZAMPIERI, NO 7210 N.W. 74T MIAMI, FL 331	H AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () ZAMPIERI, NO 7210 N.W. 74T MIAMI, FL 331	H AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SEC () ZAMPIERI, NO 7210 N.W. 74T MIAMI, FL 331	H AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	TREA () Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: NORA ZAMPIERI PRES 04/30/2008