



**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 10, 2007 8:00 am**  
**Secretary of State**

04-10-2007 90017 019 \*\*\*150.00

<b>DOCUMENT # P97000001728</b>			
1. Entity Name <b>ZEM, INC. OF PANAMA CITY</b>			
Principal Place of Business <b>13312 FRONT BEACH RD PANAMA CITY, FL 32407 US</b>		Mailing Address <b>137 N BID-A-WEE LN PANAMA CITY BEACH, FL 32413 US</b>	
<i>CHANGE Address</i>			
2. Principal Place of Business - No P.O. Box # <b>7510 "E" THOMAS DRIVE</b>		3. Mailing Address	
Suite, Apt. #, etc. <b>SUITE E</b>		Suite, Apt. #, etc.	
City & State <b>PANAMA CITY BEACH</b>		City & State	
Zip <b>32408</b>	Country <b>FL</b>	Zip	Country
4. FEI Number <b>59-3424719</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>NABORS, SCOTT R 456 HARRISON AVE PANAMA CITY, FL 32401</b>		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P CASANOVA-RASCON, ZAIDA L 137 N BID-A-WEE LN PANAMA CITY BCH, FL 32413</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT RASCON, MIGUEL A 137 N BID-A-WEE LN PANAMA CITY BCH, FL 32413</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: <b>4.9-07</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	