FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000074756 (2)

3 "Z" ENTERPRISES, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Addres	s			(1885/1884 118 1814) 1884 9834 9844 8844 9844 1884 8184 1884 8146 8144 1884		
6180 SW HWY	. 200 #106	6160 SW HWY.	6160 SW HWY, 200. #108					
OCALA FL 34476			OCALA FL 34476					
						DO NOT WRITE IN TH	IIS SPACE	
						3. Date Incorporated or Qualified		
A Bringing Di	(Disisses	2a, Mailing Add	·			08/25/1997 4. FEI Number		Applied For
	ace of Business	- -¬	11922			59-3464221		Not Applicable
Suite, Apt. (1 010		Suite, Apt. #, etc.					Additional
	, ac.	- - ' '	⊢ ¬ ' '			5. Certificate of Status Desired		Required
22 City & State		27 City & State				6. Election Campaign Financing		
		28				Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the		
24]	25	29	ŀ,	30	,	Personal Property Tax due June 30.		∏ No
24]	9. Name and Address of Curr			301		10. Name and Address of New Register		
		on nogrataroa rigani		81	Name			
	RIO, JEFFREY P			L				
7361 FOREST OAKS BLVD.				82 Street Address (P.O. Box Number is Not Accepta				
SPF	HING HILL FL 34606			83	 			
				63	1			
				84	City		B5 Zij	p Code
					<u> </u>		-L 65 21	
11. Pursuant t	o the provisions of Sections 607.0	502 and 607.1508, Flor de of Florida, Such cha	rida Statutes inge was ai	s, the abov ithorized h	e-named co	rporation submits this statement for the purpose	e of changing appointment a	its registered as realistered
agent. I ar	n familiar with, and accept the obl	igations of, Section 60	7.0505, Flor	ida Statute	s	ation's board of directors. I hereby accept the		
SIGNATURE								
	Signature, typed or printed name of registered		(NOTE		ent signature req	ulrod when reinstating) DAT		
12.		ND DIRECTORS		13.	1	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D		DELETE	1.1 TITLE	`		L Change	e Addition
NAME	ZYSEK, MICHAEL STEPHE	_		1.2 NAME				
STREET ADDRESS	9650 SOUTHERN BELLE DI	₹,		1.3 STREET	T ADDRESS			
CITY-ST-ZIP	BROOKSVILLE FL 34613			1.4 CHY-	ST-ZIP			F-1
TITLE	D	<u> </u>	DELETE	2.1 TITLE			Change	Addition
NAME	ZYSEK, MICHAEL SCOTT			2.2 NAME				
STREET ADDRESS	10807 SW 57TH TER. ND.			2.3 STREET	T ADDRESS			
CITY-ST-ZIP	OCALA FL 34476			2. 4 CITY-	ST-ZIP			<u></u>
TITLE			DELETE	3.1 TITLE			Change	Addition
RAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	T ADDRESS			
CITY-ST-ZIP				3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	T ADDRESS			
CITY-ST-ZIP				4.4 CITY-5				
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS					T ADDRESS			
				5.4 CITY-5				
CITY-ST-ZIP TITLE	<u></u>		DELETE	6.1 TITLE	01.704		Change	Addition
								_
NAME				6.2 NAME	T 4000000			
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP	and fig. at the state of the st	with this files - Passas	l nunlik . 4	6.4 CITY-S	ST-ZIP	in Costino 110 07/2Vi) Elevido Statidos I Fusba	r carlifuthat t	he information
14. I nereby c	ertify that the information supplied	with this filling does no	n quality for	uie exemp	non stated I	in Section 119.07(3)(i), Florida Statutes. I furthe	under oath:	that I am an

officer or director of the corporation or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.