

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90015 034 ***150.00

DOCUMENT # M25555

1. Entity Name
1281 CORPORATION



Principal Place of Business
**C/O ELMER ZIMBELMANN
22295 S.W. 260TH STREET
HOMESTEAD, FL 33031-3808**

Mailing Address
**C/O ELMER ZIMBELMANN
22295 S.W. 260TH STREET
HOMESTEAD, FL 33031-3808**

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2679952	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

**ZIMBELMANN, ELMER
22295 S.W. 260TH STREET
HOMESTEAD, FL 33033**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D	ZIMBELMANN, ELMER
NAME	
STREET ADDRESS	22295 SW 260TH ST
CITY-ST-ZIP	HOMESTEAD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

ELMER ZIMBELMANN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/04

Date

(305) 235-6562

Daytime Phone #