

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060728

Entity Name: Z WAVE, INC.

Current Principal Place of Business:

<UNUSED>

FLAGLER BCH, FL 32136

Current Mailing Address:

P O BOX 2029

FLAGLER BCH, FL 32136

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOREHAND, ZOE B
400 S. OCEANSHORE BLVD.-BOX 2029
FLAGLER BEACH, FL., FL 32136 US

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

Officer/Director Detail :

Title D
Name FOREHAND, ZOE B
Address 400 S. OCEANSHORE BLVD
City-State-Zip: FLAGLER BCH FL 32136

Title D
Name FOREHAND, WILLIAM M
Address 400 S. OCEANSHORE BLVD
City-State-Zip: FLAGLER BCH FL 32136

I hereby 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 all other like empowered.

SIGNATURE: ZOE B. FOREHAND

D

03/12/2013

Electronic Signature of Signing Officer/Director Detail

Date