

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000001956

**Entity Name:** ZENITH AMERICAN SOLUTIONS, INC.

**Current Principal Place of Business:**

TWO HARBOR PLACE  
302 KNIGHTS RUN AVE, SUITE 1100  
TAMPA, FL 33602

**Current Mailing Address:**

TWO HARBOR PLACE  
302 KNIGHTS RUN AVE, SUITE 1100  
TAMPA, FL 33602 US

**FEI Number:** 52-1590516

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 CFO, DIRECTOR  
Name MACCORMACK, KEVIN  
Address TWO HARBOR PLACE  
302 KNIGHTS RUN AVE, SUITE 1100  
City-State-Zip: TAMPA FL 33602

Title CEO, PRESIDENT & DIRECTOR  
Name FIORI, KIM  
Address TWO HARBOR PLACE  
302 KNIGHTS RUN AVE, SUITE 1100  
City-State-Zip: TAMPA FL 33602

Title COO  
Name PAUL, SUSAN A  
Address TWO HARBOR PLACE  
302 KNIGHTS RUN AVE, SUITE 1100  
City-State-Zip: TAMPA FL 33602

*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:** KIM FIORI

CEO

02/09/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date