

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # 454188 (4)

95 MAR -6 AM 9: 28

1. Corporation Name
PAUL G. ZINTER, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2014 S.E. PORT ST LUCIE BLVD
PORT ST. LUCIE FL 34952

Mailing Address
2014 S.E. PORT ST LUCIE BLVD
PORT ST. LUCIE FL 34952

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/05/1974

3a. Date of Last Report
04/26/1994

4. FEI Number
59-1563335

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 **176V Dominic Ave**

26 **176V Dominic Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **1**

27

City & State

City & State

23 **Pt St Lucie Fla**

28 **Pt St Lucie Florida**

Zip

Country

Zip

Country

24 **3495V**

25 **St Lucie**

29 **3495V**

30 **St Lucie**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZINTER, PAUL G.
1762 DOMINIC AVE.
PORT ST. LUCIE FL 34952

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the predecessor registered agent and the applicant

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST. - ZIP

PD
ZINTER, PAUL G
1762 DOMINIC AVE
PT ST LUCIE, FL 00000

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST. - ZIP

Change Addition

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY - ST. - ZIP

ZINTER, PAULA
2882 SE FARLEY RD
PT ST LUCIE, FL 00000

DUCOR

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST. - ZIP

Change Addition

3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY - ST. - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST. - ZIP

Change Addition

4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY - ST. - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST. - ZIP

Change Addition

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST. - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST. - ZIP

Change Addition

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY - ST. - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST. - ZIP

Change Addition

14. I, the undersigned, certify that this information complies with the requirements herein and that I am qualified to file this report as required by Chapter 607, Florida Statutes. I further certify that this information is true and accurate and that my resignation shall have the same legal effect as if made under oath. This information is being filed for the purpose of changing the registered office or registered agent of the corporation and is being filed for the purpose of changing the registered office or registered agent of the corporation.

SIGNATURE:

(Signature and Printed Name of Incoming Officer or Director)

2/28/95 (407) 335-5344