2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 486403

Entity Name: ZICARO'S, INC.

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2960 N.W. COMMERCE PARK DRIVE BOYNTON BEACH, FL 33426 **Current Mailing Address: New Mailing Address:** 2960 N.W. COMMERCE PARK DRIVE BOYNTON BEACH, FL 33426 FEI Number: 59-1635756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZICARO, NICHOLAS C JR 2960 N.W. COMMERCE PARK DRIVE BOYNTON BEACH, FL 33426 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ZICARO, JR NICHOLAS, C ZICARO, JR NICHOLAS, C Name: Name: 4880 OXFORD WAY 2960 NW COMMERCE PARK DR Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOYNTON BEACH, FL 33426 Title: (X) Change () Addition Title: () Delete Name: ZICARO, HELEN E. Name: ZICARO, HELEN E. 4880 OXFORD WAY 2960 NW COMMERCE PARK DR Address: Address: BOCA RATON, FL 33434 BOYNTON BEACH, FL 33426 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition ZICARO, NICHOLAS III, Name: Name: 18115 LAKE BEND DR Address: Address: City-St-Zip: JUPITER, FL City-St-Zip: Title: () Delete Title: () Change () Addition LABELLE, PAULA Name: Name: Address: 2845 NW TIMBERCREEK CIR Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: Title: () Delete () Change () Addition MUNDY, LISA Name: Name: 6294 ETHAN DR Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Ρ SIGNATURE: NICHOLAS ZICARO 04/11/2006