

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 658933

FILED
Jan 06, 2009
Secretary of State

Entity Name: ZAT ENTERPRISES, INC.

Current Principal Place of Business:

2080 NE 2ND ST.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

2080 NE 2ND ST.
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 59-1996873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOPHRES, THEO
4940 SW LAKE GROVE CIRCLE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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:

Title: VD () Delete
Name: HUDSON, JOAN
Address: 2471 NE 14TH ST., #105
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD () Delete
Name: ZOPHRES, THEO
Address: 6200 ALMOND TERR.
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: ZOPHRES, THEO
Address: 4940 SW LAKE GROVE CIRCLE
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: THEO ZOPHRES

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date