


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # 678580 1. Entity Name ZEREP SYSTEMS, INC.	
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Principal Place of Business 4510 SOUTH WEST 102 COURT C/O PABLO D. PEREZ MIAMI, FL 33165	Mailing Address 4510 SOUTH WEST 102 COURT C/O PABLO D. PEREZ MIAMI, FL 33165
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01232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2011519	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PEREZ, PABLO D. 4510 S.W. 102 CT. MIAMI, FL	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (PRINT NAME OF REGISTERED AGENT AND DATE OF SIGNATURE)
NOTE: REGISTERED AGENT SIGNATURE REQUIRED WHEN FILING STATUS

FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, PABLO D. 4510 S.W. 102 CT. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEREZ, ADA G 4510 S W 102 CT MIAMI, FL
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03/16/05-80024-002 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pablo Perez PABLO D PEREZ 3/12/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #