

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 688069 (4)

1. Corporation Name
M.K.Z. ENTERPRISES, INC.



Principal Place of Business Mailing Address
% MICHAEL K ZIMMERMAN
7241 WEST SUNSET BLVD.
PLANTATION FL 33313 % MICHAEL K ZIMMERMAN
7241 WEST SUNSET BLVD.
PLANTATION FL 33313

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 State, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country
25 Country 30 Country

3. Date Incorporated or Qualified 09/17/1980 3a. Date of Last Report 04/21/1995
4. FBI Number NOT APPLICABLE 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

9. Name and Address of Current Registered Agent

ZIMMERMAN, MICHAEL K
7241 WEST SUNSET BLVD.
PLANTATION FL 33313

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0607 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 *Michael K Zimmerman*
Signature of person to be registered as agent or registered agent

211-96
DATE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE
NAME ZIMMERMAN, MICHAEL K
STREET ADDRESS 7241 WEST SUNRISE BLVD
CITY, ST, ZIP PLANTATION FL
2. TITLE ☐ DELETE
NAME ZIMMERMAN, MICHAEL K
STREET ADDRESS 7241 WEST SUNRISE BLVD.
CITY, ST, ZIP PLANTATION FL
3. TITLE ☐ DELETE
NAME ZIMMERMAN, MICHAEL K
STREET ADDRESS 7241 WEST SUNRISE BLVD.
CITY, ST, ZIP PLANTATION FL
4. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP
5. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP
6. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael K Zimmerman Michael Zimmerman 211-96 305 5815232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

CR2E034 (12/95)