

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90125 013 ***150.00

DOCUMENT # 807470

1. Entity Name
ZITA INC



Principal Place of Business
**1122 N ASTOR
MILWAUKEE WI 53202**

Mailing Address
**660 E MASON STREET
MILWAUKEE WI 53202
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
39-0729030

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARBONE, LE E
2130 BUCKINGHAM LANE
NAPLES FL 34112**

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MEYST, KARLA K 1122 N ASTOR STREET MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUND, MARGARET 660 E MASON STREET MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CROAK, FRANCIS R 660 E MASON ST MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHLICHT, JANE C 660 E MASON STREET MILWAUKEE WI 53202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Margaret Lund
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/03
Date

414 227-1205
Daytime Phone #

CR2E034 (10/02)

Attachment 70019738
807470



COOK & FRANKE s.c.

ATTORNEYS AT LAW

Margaret T. Lund
Direct: (414) 227-1205
Email: mtlund@cf-law.com

 MERITAS LAW FIRMS WORLDWIDE

Please reply to Milwaukee office

February 12, 2003

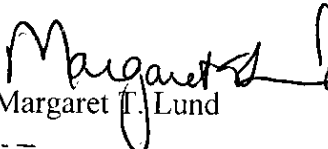
Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee FL 32302-1500

Re: Zita, Inc.

Enclosed for filing is the original completed and signed 2003 For Profit Corporation Uniform Business Report for the above entity. We have also enclosed a check in the amount of \$150.00 to cover the fee.

If you have any questions, please call me at the telephone number indicated at the top of this letter.

Very truly yours,


Margaret T. Lund

Enclosures
#276527:10274

OF COUNSEL LAW SERVE, LLC

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