


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # F01978
 1. Entity Name
ZEPPPELIN ENTERPRISES, INC.



Principal Place of Business 1301 WEST HIGHWAY 434 WINTER SPRGS, FL 32708	Mailing Address 1301 WEST HIGHWAY 434 WINTER SPRGS, FL 32708
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03262004 No Chg-P CR2E034 (10/03)



4. FEI Number 59-2035553	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCDUFFIE, JAMIE
 1301 W. HWY. 434
 WINTER SPRINGS, FL 32708

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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  DATE 

Signature is typed or printed name of registered agent and is applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00


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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MCDUFFIE, JAMIE 613 BENEDICT WAY CASSELBERRY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 04/12/04-80036-008 158.75

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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:  DATE: 4/1/04 DAYTIME PHONE #: 407 699 9833

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR