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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

ZIMMER CONSTRUCTION CONSULTANTS, P.A.

| Principal Place of Business Maing Address  |   |   |  |   | ( 100) 100 titl (0000 1110) 110(0 1101)  | 8:0: 8:8:: 9:9:: 9:3:: 8  | ·····   |
|--|---|---|--|---|--|---------------------------|---|
|  |   | 1340 SW 19TH ST<br>BOCA RATON FL 334                            | <b>96</b>  |   |  |                           |   |
|  |   | US  | ş<br>  |   | 3. Date Incorporated or Qualified 03/21/1982   | 3a. Date of Las<br>03/01/ | 1995  |
| Principa! Plac   | e of Business   | 2a. Mailing Address   |  |   | 4. FEI Number 59-2169539   | }                         | Applied For<br>Not Applicable   |
| Suite, Apt. #,   | etc.  | Suite, Apt. #, etc.   |  |   | Certificate of Status Desired  |                           | .75 Additional<br>ee Required   |
| City & State   |   | City & State  |  |   | 6. Election Campaign Financing Trust Fund Contribution                                 |                           | 5.00 May Be   |
|  | Country   | <b>28</b> Zip   | Count  | N   | 8. This corporation has liability for i  | intangible tax und        |   |
| Zip  | 25  | 29  | 30   |   | Florida Statutes X Yes   | □ No                      |   |
|  | 9. Name and Address of Curre  | nt Registered Agent   |  |   | 10. Name and Address of New R  | tegistered Agent          |   |
|  |   |   | 8  | II Name   |  |                           | _   |
| ZIMMER, RICHARD M  |   |   | 62 Street Ac   |   | ldress (P.O. Box Number is Not Acceptable)   |                           |   |
| 1340 SW  |   |   |  | 33  |  |                           |   |
| •  |   |   | Ľ  |   |  |                           | T 7 - 0 - 3 -   |
| BOCA RA  | BOCA RATON FL 33486   |   |  | 34 City   |  | FL 85                     | Zip Code  |
|  |   | e contisso Firida Chat  | too the show   | o nomed conv  | ration submits this statement for the pul<br>ard of directors. I hereby accept the app | roce of changing          | its registered of   |
| familiar with  | n, and accept the obligations of, Sec   |   |  | igent signature require   | ed when reinstaling)   | DATE                      |   |
| familiar with  | Signature, typed or printed name of registered ager   |   |  | igent signature requiri   | ed when reinstating) ADDITIONS/CHANGES TO OFF  | ICERS AND DIRE            |   |
| familiar with<br>GNATURE   | Signature, typed or printed name of registered ager   | nt and tille if applicable. (f                                  | NOTE: Registered A   |   | ed when renstating)  ADDITIONS/CHANGES TO OFF  |                           |   |
| familiar with  | Signature, typed or printed name of registered eger<br>OFFICERS AP<br>C:P<br>ZIMMER, RICHARD M.   | nt and tille if applicable. (f                                  | NOTE: Registered A  13. 1.1 THT  | TE TE   | ed when renstating) ADDITIONS/CHANGES TO OFF   | ICERS AND DIRE            |   |
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NG OFFICER OR DIRECTOR