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May 05, 1999 8:00 am
Secretary of State

05-05-1999 90230 045 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000002558

1. Corporation Name

ZAPATA GROUP SERVICES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2699 S BAYSHORE DRIVE
PENTHOUSE B
COCONUT GROVE FL 33133
US

Mailing Address

2699 S BAYSHORE DRIVE
PENTHOUSE B
COCONUT GROVE FL 33133
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

05/17/1994

4. FEI Number

65-0470363

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 owes the current year Intangible
Personal Property Tax.

☐

Yes No

9. Name and Address of Current Registered Agent

HAZDAY, SALOMON JR
2699 S BAYSHORE DRIVE
PENTHOUSE B
COCONUT GROVE FL 33133

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 607.0502 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ZAPATA, -GOMEZ C
STREET ADDRESS 2699 S BAYSHORE DR, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☒ DELETE

TITLE DS
NAME ZAPATA-BAKAS, CLAUDIO
STREET ADDRESS 2699 S BAYSHORE DR, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☒ DELETE

TITLE D
NAME LIANO-CUENCA, RICARDO
STREET ADDRESS 2699 S BAYSHORE DRIVE, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☒ DELETE

TITLE D
NAME ZAPATA-AKINCILAR, HERNAN
STREET ADDRESS 2699 S BAYSHORE DRIVE, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☐ DELETE

TITLE COO
NAME TORRES, RAYMOND
STREET ADDRESS 2699 S BAYSHORE DRIVE, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☐ DELETE

TITLE EO
NAME LORENZANA, JORGE
STREET ADDRESS 2699 S BAYSHORE DRIVE, PENTHOUSE B
CITY-ST-ZIP COCONUT GROVE FL 33133

☒ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

SECRETARY
SALOMON HAZDAY JR
2699 S. BAYSHORE DRIVE PH -B
COCONUT GROVE, FL 33133

☐ Change

☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99

305 856 8804

Date

Daytime Phone #

CR2E034 (11/98)