

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 12, 1999 8:00 am
Secretary of State

04-12-1999 90013 022 ***150.00

DOCUMENT # F96000002130

1. Corporation Name
NEW Z CORPORATION

Principal Place of Business
805 TURNER STREET
CLEARWATER FL 33756

Mailing Address
805 TURNER STREET
CLEARWATER FL 33756



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/26/1996

4. FEI Number
22-2154500

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

2. Principal Place of Business
21 280 Bailey Street

2a. Mailing Address
26 280 Bailey St

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23 Safety Harbor FL

City & State
28 Safety Harbor FL

Zip
24 34695

Country
29 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRUYNELL, JOHN E
805 TURNER STREET
CLEARWATER FL 34616

81 Name BRUYNELL, JOHN E
82 Street Address (P.O. Box Number is Not Acceptable)
280 Bailey Street
83
84 City Safety Harbor FL 85 Zip Code 34695

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 PC
NAME BRUYNELL, JOHN E
STREET ADDRESS 805 TURNER STREET
CITY-ST-ZIP CLEARWATER FL 34616

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME BRUYNELL, JOHN E
1.3 STREET ADDRESS 280 Bailey Street
1.4 CITY-ST-ZIP Safety Harbor FL 34695

☐ 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: *John E Bruynell* JOHN E BRUYNELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/99 (127) 48-8655
Date Daytime Phone #

CR2E034 (11/98)

0413579