

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G75744

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** ZENITH TRAVEL CONSULTANTS, INC.

**Current Principal Place of Business:**

195 SOUTH WESTMONTE DR.  
SUITE 1124  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

195 SOUTH WESTMONTE DR.  
SUITE 1124  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 59-2353872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHIFF, ZENA PTD  
1319 W. WEBSTER ST.  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DVS  
Name: BROWN, MARCY S MS.  
Address: 1725 TURNBERRY TERRACE  
City-St-Zip: ORLANDO, FL 32804

Title: PTD  
Name: SCHIFF, ZENA MRS.  
Address: 1319 W. WEBSTER ST.  
City-St-Zip: ORLANDO, FL 32804

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARCY S BROWN

DVS

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date