FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name G93120

(5)

J. ZIMMERMAN ENTERPRISES INC.

Principal Place	of Business	 M	lailing Address						III BITH FIRM O	
104 12TH S Ruskin Fl Us	T SW		104 12TH ST SW RUSKIN FL 33570 US							
							3. Date Incorporated or Qualified 3a. Date of Last Repor 03/26/1984 04/19/1995			
	ace of Business	F-1	Mailing Address				4. FEI Number	_	<u>-</u> -	Applied For
21 Suito Act	# ata	26					59-2387400			Not Applicable
Suite, Apt. #. etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees
Ζφ 24	Country 25	29	Ζφ	30 Cou	ntry			: 🔲 N	o	s 199.032,
	9. Name and Address of Currer	it Regis	tered Agent				10. Name and Address of New I	Registe	red Agent	
711.M.CD	AAAA JIRI DIAD				81	Nanie				13.0
	MAN, WILBUR 'H ST SW			ŀ	82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)		
	FL 33570			-	83					
************	12 00010									
				1	84	City			= L 85	Zip Code
12.	Styrial we typed or practed name of registated a year OFFICERS ANI		TORS	TE Beginhered.	Agent	l signature region	d wher renstatings ADDITIONS/CHANGES TO OFF	DAT		TORS IN 12
TITLE	PD		☐ DELETE	1 1 10	ſL E			1011101	Chang	
NAME	ZIMMERMAN, WILBUR			1.2 N A	ME					
STREET ADDRESS	104 12 ST SW			13519	REET.	ADDRESS				
CITY-ST-ZIF	RUSKIN FL			1401	Y - \$1	r-ZIP				
TITLE NAME			DELETE	2 1 111	LE.				Chang	e 🔲 Addition
STREET ADDRESS				2 2 NAI						
CITY-ST-ZIP						ADDRESS				
TITLE			DELETE	2.4 CIT		-ZIF			-	
NAME			ш	3 2 NA					☐ Chang	e 🗌 Addition
STREET ADDRESS						ADDRESS				
CITY-S1-ZIP				3.4 CIT						
TITLE			☐ DELETE	4 1 111					☐ Change	Addition
NAME				4 2 NAM	ЛE					
STREET ADDRESS				4 3 STR	EH A	ADDRESS				
CITY - ST - ZIP				4.4 CITY		- ZIF				
THILE			DELETE.	5 1 1(1)					Change	Addition
NAME STREET ADDRESS				5 2 NAN						
						CORESS				
CITY-ST-ZIP TITLE			DELETE	54 CHY		- ZIP				
NAME			L) becare	6) TITI 6 2 NAM					Change	Addition
STREET ADDRESS						paccec				
				6.3 STR	EEIA	IDURESS				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 appears in Block 12 or Block 13 if changed, or on any attachment with an address. 2/ fal Himmema SIGNATURE: V

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR