FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 30, 2001 8:00 am **DOCUMENT # G93120 Secretary of State** 1. Entity Name J. ZIMMERMAN ENTERPRISES INC. 03-30-2001 90318 015 ***150.00 Principal Place of Business Mailing Address 104 12TH ST SW 104 12TH ST SW บบชบสก RUSKIN FL 33570 RUSKIN FL 33570 3. Mailing Address 1403 INGRAM DRIVE 2. Principal Place of Business 1403 INGRAM DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2387400 Not Applicable SUN CITY CENTER. SUN CITY CENTER. Country USA \$8.75 Additional Zip 33573-6337 Zip 33573-6337 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ZIMMERMAN, WILBUR Street Address (P.O. Box Number is Not Acceptable) $1403\ TNGRAM\ DRIVE$ 104 12TH ST SW RUSKIN FL 33570 SUN CITY CENTER, FL 33573-6337 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete ZIMMERMAN, WILBUR STREET ADDRESS 104 12 ST SW STREET ADDRESS 1403 INGRAM DRIVE CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER, FL **RUSKIN FL** 33573-6337 ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE ☐ Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Wilbur Zimmerman

(813)633-183\$