2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # H41026

1. Entity Name ZOOLOGICAL CONSULTANTS, INC.

Principal Place of Business

C/O EARL E, SCHOBERT 14212 FLORIDA AVE TAMPA, FL 33613 Mailing Address

C/O EARL E. SCHOBERT 14212 FLORIDA AVE TAMPA, FL 33613

FILED Jan 20, 2004 08:00 AM Secretary of State



01092004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2528380 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHOBERT, EARL E. 14212 FLORIDA AVE TAMPA, FL 33613

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				114	INIS SPACE
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP SCHOBERT, EARL E. 14212 FLORIDA AVE TAMPA, FL	TORS .			U00000007898 01/20/04-80042-024 150.00
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZBP					
THE NAME STREET ADDRESS CITY-ST-ZIP					•
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					