

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

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS**

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 13 PM 4: 26

DOCUMENT # J06217 (0)

**1. Corporation Name
ZUMA CORP.**

**Principal Place of Business
5401 RIVEREDGE DR.
TITUSVILLE FL 32780**

**Mailing Address
5401 RIVEREDGE DR.
TITUSVILLE FL 32780**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/26/1986
3a. Date of Last Report 04/21/1994

4. FEI Number 59-2650557
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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZUMAETA, WALTER M.
5402 RIVEREDGE DR.
TITUSVILLE FL 32780**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Walter Zumaeta

Walter Zumaeta

DATE

4-10-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE PS
NAME ZUMAETA, WALTER M.
STREET ADDRESS 5402 RIVEREDGE DR.
CITY- ST- ZIP TITUSVILLE FL**

11 TITLE ☐ Change ☐ Addition

**TITLE V
NAME ZUMAETA, MARIA T
STREET ADDRESS 8886 VESTA TER.
CITY- ST- ZIP ORLANDO FL**

21 TITLE ☐ Change ☐ Addition

**TITLE T
NAME LAMBERT, KERON E
STREET ADDRESS 5402 RIVEREDGE DR.
CITY- ST- ZIP TITUSVILLE FL**

31 TITLE ☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

41 TITLE ☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

51 TITLE ☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

61 TITLE ☐ Change ☐ Addition

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 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.

SIGNATURE:

Walter Zumaeta

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter Zumaeta *4-10-95* *2690268*