2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
~~Apr~~ 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L17245

1. Entity Name
Z & G CONSULTANTS, INC.

Principal Place of Business	Mailing Address
751 MALAGA AVE. CORAL GABLES, FL 33134	751 MALAGA AVE. CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

01142004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0141751

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ZANNIS, THOMAS N.
751 MALAGA AVE.
CORAL GABLES, FL 33134

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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 _____

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

U00000105625
04/07/04-80033-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	VT
NAME	ZANNIS, THOMAS N.
STREET ADDRESS	751 MALAGA AVE.
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	P
NAME	ZANNIS, GLORIA A.
STREET ADDRESS	751 MALAGA AVE.
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 a title empowered.

SIGNATURE: (Thomas N. ZANNIS) 4/4/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date