## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE-

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # L69721

1. Corporation Name

## Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90258 024 \*\*\*150.00

ZUUM A	UTU SALES ING.	-									
Principal Place	of Business	Mailing Add	ress				1 (88146)) 610 6414 (881) (8810 (881	:   0  0 0   0:0	111 81911 8191	) =:=(: -:	
1935 W 76TH S	ST .	1935 W 76TH ST					1				
HIALEAH FL 33	014	HIALEAH FL	HIALEAH FL 33014				DO NOT WRITE	E INI THIS (	SDACE		
	·				_		3. Date Incorporated or Qualifed		3FACE		$\Box$ _
	and the second s			Ť			05/02/1990				
2 Principal P	lace of Business	2a Mailing A	2a. Mailing Address				4. FEI Number			Applied For	-
	iace of Business	—	26				65-0189813		<u> </u>	Not Applicable	le
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				-		\$8.75	Additional	
22	•	<u> </u>	27				5. Certificate of Status Desired		Fee F	Required	
City & State	8	<del></del>	City & State				6. Election Campaign Financing		\$5.00	May Be	
23	<u> </u>	28	28				Trust Fund Contribution			to Fees	_
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current			σ	
24	25	29		30			Personal Property Tax.		∭ Yes	□No	_
	9. Name and Address of Curre	nt Registered Ag	ent		81	Name	10. Name and Address of New Re	gistered A	gent		-
1 O D	ez, eduardo j.				°'	Name .					
	5 W 76TH ST				82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)			- 1
	EAH FL 33014										$\dashv$
11012					83						
	•				84	City		FL	85 Zip	o Code	
44 D	to the providing of Sections 607.05	02 and 607 1509	Florida Statut	oe the a	hove	-named corn	oration submits this statement for the p		hanging i	ts registered	$\dashv$
office_or_r	to the provisions of Sections 607.05 egistered agent, or both, in the State	of Florida, Such	change was a	uthorized	Lby t	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	the appoin	tment as:	registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section (	607.0505, FIG	nda Stati	nes.						
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable.	(NOTE	: Registered	Agent	signature require	d when reinstating)	DATE	•		<b>1</b>
12.		ND DIRECTORS	·	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECT	ORS IN 12	}
TITLE	DP		DELETE	1.1 TI	LΕ				☐ Change	e 🗌 Addit	ion
NAME	LOPEZ, EDUARDO J.			1.2 NA	ME						
STREET ADDRESS	1824 W 72ND PL			1.3 ST	REET	ADORESS					í
CITY-ST-ZIP	HIALEAH FL		1.4 CI	1.4 CITY-ST-ZIP				·		3	
TITLE			DELETE	2.1 111	ΠE				Change Change	e	ion   '
NAME		22		2.2 NA	22 NAME						
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS						ļ	
CITY-ST-ZIP				2. 4 C	TY-ST	r-zip					_
TITLE	☐ DELETI		DELETE	3.1 TITLE					☐ Change	e 🔲 Additi	ion
NAME				3.2 NA	ME						
STREET ADDRESS				3.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	·			3.4. C	ITY-ST	r-zip	•				
TITLE			□ DELETE	4.1 TI	ΓLE				☐ Change	e	ЮЛ
NAME				4.2 N	AME						Į.
STREET ADDRESS				4.3 ST	REET	ADDRESS					
CITY-ST-ZIP					TY-ST	-ZIP					
TITLE	☐ DELETE			5.1 TITLE				Change	e 🗍 Addit	IOU	
NAME				5.2 NA							
STREET ADDRESS	,					ADDRESS					
CITY-ST-ZIP	·				TY-ST	- ZIP					tion
TITLE			☐ DELETE	6.1 TT		1			☐ Change	e 🗌 Addit	JULI
NAME				6.2 N/		4000555					
STREET ADDRESS				6.3 ST	REET	ADDRESS					- 1

14. 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 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 with all other like empowered.

SIGNATURE: