

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998



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

FILED

98 APR 17 PM 12:21

W4/20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L93000000086

~~Z WEST, L.C.~~
~~330 FIFTH AVENUE~~
~~INDIANLANTIC FL 32903~~

1a. Principal Place of Business Address

~~330 FIFTH AVENUE~~
~~INDIANLANTIC FL 32903~~
3154 Northside Dr Ste 101
Key West FL 33040

2. Principal Place of Business

3154 Northside Dr
Suite, Apt. #, etc. Suite 101

2a. Mailing Address

SAME
Suite, Apt. #, etc. SAME

City & State

Key West

City & State

SAME

Zip

33040 Monroe

Zip

33040

Country

3. Date Organized or Qualified

02/23/1993

3a. State of Formation

FL

4. FEI Number

59-3167634

☐ Applied For

☐ Not Applicable

5. Date of Last Report

05/15/1997

6. Certificate of Status Desired

☐ \$0.75 Additional Fee Required

7. Name and Address of Current Registered Agent

ZIRILLI, ANTHONY
~~330 FIFTH AVENUE~~
~~INDIANLANTIC FL 32903~~

8. Name and Address of New Registered Agent/Office

Name

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

3154 Northside Dr

Suite, Apt. #, etc.

Suite 101

City

Key West

Zip Code

FL 33040

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

DATE

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR

ZIRILLI, ANTHONY C

3154 Northside Dr
~~330 FIFTH AVENUE~~

Key West FL
~~INDIANLANTIC FL~~

MGR

ZIRILLI, SUSAN D

~~330 FIFTH AVENUE~~
3154 Northside Dr

INDIANLANTIC FL
Key West

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****188.75 ****188.75

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

Anthony Zirilli

TONY Zirilli

4-15-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #