


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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # M15947 (8)
 1. Corporation Name
ZBENG CORPORATION

Principal Place of Business: **2210 FRONT STREET STE. 308 MELBOURNE FL 32901 US**
 Mailing Address: **P O BOX 1812 MELBOURNE FL 32902 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-23) and Mailing Address (24-30) fields with sub-sections for Suite, Apt. #, etc., City & State, and Zip/Country.

3. Date Incorporated or Qualified: **05/24/1985**
 4. FEI Number: **59-2554740**
 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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
CRIGLER, ROBERT
71 HAVEN DRIVE
WEST MELBOURNE FL 32904

10. Name and Address of New Registered Agent
 81 Name: **Crigler, Robert**
 82 Street Address (P.O. Box Number is Not Acceptable): **3631 Turtle Run Blvd # 736**
 83
 84 City: **Coral Springs** FL 85 Zip Code: **33067**

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: *Robert Crigler* DATE: **1-26-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS <input type="checkbox"/> DELETE	1.1 TITLE	PS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRIGLER, ROBERT	1.2 NAME	Crigler, Robert
STREET ADDRESS	71 HAVEN DRIVE	1.3 STREET ADDRESS	3631 Turtle Run Blvd #736
CITY-ST-ZIP	WEST MELBOURNE FL	1.4 CITY-ST-ZIP	Coral Springs, FL 33067
TITLE	VT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEEDKE, DAVID	2.2 NAME	
STREET ADDRESS	2635 CORBUSIER DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Robert Crigler* DATE: **1-21-98**

CR2E034 (10/97)