

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M42795

FILED
May 04, 2006
Secretary of State

Entity Name: ZEITS FLORIDA CORPORATION

Current Principal Place of Business:

201 CRANDON BLVD., #407, PH 1
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

8360 WEST FLAGLER STREET., #200
MIAMI, FL 33144

New Mailing Address:

FEI Number: 59-2745758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIOS, LUIS O CPA
8360 WEST FLAGLER STREET., #200
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAVARD, FRANCISCO
Address: 799 CRANDON BOULEVARD #404
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: OYARZABAL DE RAVARD, A
Address: 799 CRANDON BOULEVARD #404
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: RAVAR, FRANOISCO A
Address: 799 CRANDON BOULEVARD #404
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCISCO RAVARD

PD

05/04/2006

Electronic Signature of Signing Officer or Director

Date