

FILED
Jun 27, 2001 8:00 am
Secretary of State

05-16-2001 90258 040 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000063903

1. Entity Name

ZIGGY INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

16 MCKINLEY AVE.
LEHIGH ACRES FL 3393616 MCKINLEY AVE.
LEHIGH ACRES FL 33936

2. Principal Place of Business

3. Mailing Address

4024 Dr. ML King Jr. Blvd. Suite, Apt. #, etc.

4024 Dr. ML King Jr. Blvd. Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

65-1020279

Applied For

Not Applicable

Zip
33916

Country

Zip
33916

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEELE, ANDREW C
4135 DR. MLK BLVD.
FT. MYERS FL 33916

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	STEELE, ANDREW C	
STREET ADDRESS	4135 DR. MLK BLVD.	
CITY-ST-ZIP	FT. MYERS FL 33916	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZIEGENFUS, ROBERT I	
STREET ADDRESS	16 MCKINLEY AVE	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert L. Ziegenfus

Date

Daytime Phone #

2/14/01 (941) 334-8750

CR2E034 (10/00)