2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089641

Entity Name: ZICARO SERVICES, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2960 NW COMMERCE PARK DR BOYNTON BEACH, FL 33426

Current Mailing Address: New Mailing Address:

2960 NW COMMERCE PARK DR BOYNTON BEACH, FL 33426

FEI Number: 65-1050373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LABELLE, PAULA M

2960 NW COMMERCE PARK DR

BOYNTON BEACH, FL 33426 US

ZICARO, NICHOLAS C

2960 NW COMMERCE PARK DR

BOYNTON BEACH, FL 33426 US

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: NICHOLAS ZICARO 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 LABELLE, PAULA M
 Name:
 ZICARO, NICHOLAS

 Address:
 4880 OXFORD WAY
 Address:
 4880 OXFORD WAY

 City-St-Zip:
 BOCA RATON, FL 33434
 City-St-Zip:
 BOCA RATON, FL 33434

Title: DST (X) Delete Title: () Change () Addition

 Name:
 MUNDY, LISA D
 Name:

 Address:
 900 VIA LUGANA CIRCLE UNIT 308
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33426
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 ZICARO, NICHOLAS C
 Name:

 Address:
 4880 OXFORD WAY
 Address:

 City-St-Zip:
 BOCA RATON, FL 33434
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NICHOLAS ZICARO MR 04/25/2005