

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-02-2007 90009 030 ***158.75

DOCUMENT # P01000051630

1. Entity Name

ZZAAZZ, INC.



Principal Place of Business
125 HICKORY CREEK BLVD.
BRANDON FL 33511-8065

Mailing Address
125 HICKORY CREEK BLVD.
BRANDON FL 33511-8065

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1135985

Applied For

Not Applicable

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

ROCKEFELLER, BEVERIDGE J
125 HICKORY CREEK BLVD
BRANDON FL 33511

Name

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

City

FL

Zip Code

Confirming

8. The above named entity submits this statement for the purpose of its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Beveridge J Rockefeller

Beveridge J Rockefeller

1/21/07

FILE NOW!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST ROCKEFELLER, JANET D 125 HICKORY CREEK BLVD. BRANDON FL 33511-8065 <i>Vice Pres</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROCKEFELLER, BEVERIDGE J 125 HICKORY CREEK BLVD BRANDON FL 33511-8065 <i>President</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Barnett Jean R</i> 125 Hickory Creek Blvd Brandon FL 33511 <i>Secy</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Helen Huttman</i> 125 Hickory Creek Blvd Brandon FL 33511 <i>Treas.</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Beveridge J Rockefeller

1/21/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #