## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 30, 2008 08:00 AM **Secretary of State DOCUMENT # P01000069277** 1. Entity Name Z & D, INC. Mailing Address Principal Place of Business 3130 S.W. 107TH AVENUE 3130 S.W. 107TH AVENUE MIAMI, FL 33165 MIAMI, FL 33165 No Chg-P CR2E034 (11/05) 01042008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1127270 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE ZABALA, LUIS 11215 S.W. 30TH STREET MIAMI, FL 33165 IN THIS SPACE 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. I am familiar with, and accept , the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title it applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE NAME ZABALA, LUIS STREET ADDRESS 11215 S.W. 30TH ST CITY-ST-ZIP MIAMI, FL 33165 STD TITLE NAME DIAZ, ELIO U00000905061 12210 SW 43RD ST STREET ADDRESS 02/05/08-80094-012-150.00 MIAMI, FL 33175 CITY- ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED