

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 10, 2003 8:00 am**  
**Secretary of State**

03-10-2003 90130 002 \*\*\*150.00

**DOCUMENT # P01000099247**

1. Entity Name  
**S & Z INVESTORS, INC.**



Principal Place of Business  
**16740 NE 9TH AVENUE #701  
NORTH MIAMI BEACH FL 33162**

Mailing Address  
**16740 NE 9TH AVENUE #701  
NORTH MIAMI BEACH FL 33162**

**30045249**



2. Principal Place of Business  
**1200 NE MIAMI GARDENS DR  
Suite, Apt. #, etc.  
# 920**

3. Mailing Address  
**1200 NE MIAMI GARDENS DR  
Suite, Apt. #, etc.  
# 920**

☐ CHECK HERE IF MAKING CHANGES

City & State  
**N. MIAMI BEACH FL**  
Zip  
**33179**

City & State  
**N. MIAMI BEACH FL**  
Zip  
**33179**

4. FEI Number  
**65-1146367**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SHABABO, ZEEV  
16740 NE 9TH AVENUE #701  
NORTH MIAMI BEACH FL 33162**

7. Name and Address of New Registered Agent

Name  
**SHABABO, ZEEV**  
Street Address (P.O. Box Number is Not Acceptable)  
**1200 NE MIAMI GARDENS DR  
# 920**  
City  
**N. MIAMI BEACH FL** Zip Code  
**33179**

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

**4/1/03**  
DATE

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 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  
**D  
SHABABO, ZEEV  
16740 NE 9TH AVENUE #701  
NORTH MIAMI BEACH FL 33162** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SHABABO, ZEEV  
1200 NE MIAMI GARDENS DR # 920  
N. MIAMI BEACH FL 33179** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
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STREET ADDRESS  
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☐ Delete

TITLE  
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STREET ADDRESS  
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☐ Change ☐ Addition

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CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Yoon Shaloho*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/1/03**  
Date

Daytime Phone #

CR2E034 (10/02)