## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000034369 1. Entity Name

SIGNATURE:

ZEPPLIN HURRICANE SERVICES, INC.



## FILED

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SECRETAIN OF STATE
TALLAHASSEE, FLORIDA

Daytime Phone =



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Suite, April #, etc.  City & State Permittrioke Pines, Florida  City & State Country 33028  Country 33028  DO NOT WRITE IN THIS SPACE   Country  DO NOT WRITE IN THIS SPACE   The above named only submits this attenument for the purpose of changing its registered offers or registered agent, or both, in the State of Florida. I an immitted with an immitted to the purpose of changing its registered offers or registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida. I an immitted with a decentary of registered agent, or both, in the State of Florida of agent a		lace of Business	3. Mailing Address	·	ag -		
City & State Pembroke Pines, Florida  Zio Country DO NOT WRITE IN THIS SPACE    Name and Address of Current Registered Agent   Name and Address of Current Registered	15665 NW 5 Street				DO NOT WIDITE IN THIS SDACE		
Pembroke Pines, Florida  Zio Country S. Certificate of Status Desired Country S. Certificate of Status Desired Country S. Certificate of Status Desired Status Country S. Certificate of Status Desired C	State, Apr.	#, 610.	Julies, Apr. W. Bio.		_		
Zip   Country   Zip   Country   Zip   Country   S. Certificate of Status Desired   \$8.75 Additional Fee Required   \$1.000 NOT WRITE IN THIS SPACE   Name   Spiegel & Utrera, P.A.			City & State		4. FEI Number 04-3629179	Applied For Not Applicable	
DO NOT WRITE IN THIS SPACE    Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country			
DO NOT WRITE IN THIS SPACE    Screet Address (P.O. Box Number is Not Acceptable)	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>					ent	
IN THIS SPACE  1840 Coral Way, 4th Floor  City Miami  FL Zip Code 33145  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Synamic speak or printed name of registered agent and the 4 expiritable  Apart of Florida Department of State  10. OFFICERS AND DIRECTORS  ITTLE MAME 10. OFFICERS  10. OFF		DO MOT M	/ 6/ 2 -V- P	Name Sp	iegel & Utrera, P.A.		
Exposure support of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the obligations of registered agent.  SIGNATURE  January 1 - May 1 Fee is \$150.00  After May 1, Fee is \$150.00  After May 1, Fee is \$550.00  Amended URB is \$61.25  Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS  ITTLE  MANZ  SIREET ADDRESS  OITY-51-2P  TITLE  MANZ  SIREET ADDRESS  OI				Street Addr	Street Address (P.O. Box Number is Not Acceptable)		
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  January 1. May 1 Fee is \$150.00  After May 1, Fee is \$550.00  Anter May 1, Fee is \$550.00  Alter May 1, Fee is \$550.00  Anter May		IN THIS SI	PACE	1840 Co	oral Way, 4th Floor		
SIGNATURE   Superior repeal or printed name of registered agent and the it applicable   (NOTE Registered Agent signature required when relatived when relati				City Mian	City Miami FL Zip Code 33145		
Simple control of the circle of registered applicable   Simple control of the circle			or the purpose of changing its	registered office or re	gistered agent, or both, in the State of Florida. I am familia	ar with, and accept	
After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State  10.	SIGNATURE _	Signature, typed or printed name of registered ager	a and title if applicable. (NOTE	Registered Agent signature re	equired when reinstating) DATE		
10.		After May 1, Fee is \$550.00 Amended UBR is \$61.25	of State			\$5.00 May Be Added to Fees	
NAME   100040494651   100040494651   100040494651   100040494651   100040494651   10004040494651   100040494651							
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NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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## AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA	)
COUNTY OF BROWARD	) )

- 1. John C. Peake is a President of ZEPPLIN HURRICANE SERVICES, INC., a Florida corporation, (hereinafter "Corporation").
- 2. That the Corporation failed to file its 2004 Uniform Business Report or pay the 2004 Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
  - 2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
- 3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment by the Corporation of its 2004 Uniform Business Report filing fee, which are presented simultaneously with this Affidavit.
- 4. ZEPPLIN HURRICANE SERVICES, INC. satisfies the requirements of the Florida Statutes 607.0401.

Dated: 17 day of Nig., 2004

FURTHER, AFFIANT SAYETH NOT

ZEPPLIN HURRICANE SERVICES, INC

Held -

SWORN AND SUBSCRIBED

before me this Aus day of 17 John Cusey Petricl Produced

Florida at Large

Notary Public State of Florida at Large Printed Name: Mana Peros

Commission Expi

MARIA REYES
MY COMMISSION # DD 321070
EXPIRES: May 18, 2008
Bonded Thru Notery Public Underwriters