

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 23, 2006 8:00 am
Secretary of State

05-23-2006 90011 037 ***150.00

DOCUMENT # **P02000049035**

1. Entity Name

CIMZIA CORPORATION



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3920 SW 40 AVE

3. Mailing Address

Suite, Apt. #, etc.

PFMBROK PARK

Suite, Apt. #, etc.

City & State

City & State

Zip

33023

Country

FL

Zip

Country

4. FEI Number

40094098

CR2E034B (8/05)

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE
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

Giulia Tummozillo

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5-15-06

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended AR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
GIULIA TUMMOZILLO
330 SE 2 ST 203 E
HALLA MOALE FL 33009

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

GIULIA TUMMOZILLO CIMZIA CORP 5-15-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #