

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90291 002 ***150.00

DOCUMENT # P02000101659

1. Entity Name
TZITAS CORPORATION, INC.



Principal Place of Business
2111 NORTH FLAGLER DR.
APT. 28
WEST PALM BEACH, FL 33407

Mailing Address
2111 NORTH FLAGLER DR.
APT. 28
WEST PALM BEACH, FL 33407

2. Principal Place of Business
3872 VICTORIA DR

3. Mailing Address
3872 VICTORIA DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03242005 Chg-P CR2E034 (10/03)



City & State
WEST PALM BEACH FL

City & State
WEST PALM BEACH FL

4. FEI Number
55-0798070

Applied For
Not Applicable

Zip
33406

Country
PB

Zip
33406

Country
PB

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

TZITAS, MARCO A
2111 NORTH FLAGLER DR.
APT. 28
WEST PALM BEACH, FL 33407

Name

Street Address (P.O. Box Number is Not Acceptable)
3872 VICTORIA DR.

City **West Palm Beach FL** Zip Code **33406**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME TZITAS, MARCO A
STREET ADDRESS 2111 NORTH FLAGLER DR., APT 28
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3872 VICTORIA DR.**
CITY-ST-ZIP **WEST PALM BEACH FL 33406**

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

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

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:

MARCO A TZITAS

3/24/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #