

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000121418

1. Entity Name
ZORNOI INC.



FILED
Jan 17, 2007 08:00 AM
Secretary of State

Principal Place of Business
ACE AMERICA'S CASH EXPRESS
7392 RADIO ROAD
NAPLES, FL 34104

Mailing Address
7392 RADIO ROAD
NAPLES, FL 34104



DO NOT WRITE IN THIS SPACE

01102007 No Chg-P CR2E034 (11/05)

4. FEI Number
42-1560591

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CARY, DAVID
11325-C DEL PRADO BLVD. S.
CAPE CORAL, FL 33990

**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

Signature of person or persons holding registered agent title (add table)

(NOTE: Registered Agent Signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DP
URICH, RICHARD
8596 SOUTHWIND BAY CIRCLE
FORT MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
STD
URICH, BRENDA
8596 SOUTHWIND BAY CIRCLE
FORT MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

U00000588347
01/17/07-80067-023 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:

Brenda Urich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-07 239-292-5399
Date Daytime Phone