2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# P03000045501

Entity Name: ZG ACCOUNTING SERVICES, INC.

Current Principal Place of Business:

2100 SALZEDO STREET
SUITE 301-B
CORAL GABLES, FL 33134

New Principal Place of Business:

16503 SW 67 TERRACE
MIAMI, FL 33193

Current Mailing Address:

2100 SALZEDO STREET
SUITE 301-B
CORAL GABLES, FL 33134

New Mailing Address:

16503 SW 67 TERRACE
MIAMI, FL 33193

FEI Number: 58-2683283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUZMAN, ZORAIDA
16503 SW 67 TERRACE
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GUZMAN, ZORAIDA
Address: 2100 SALZEDO STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete
Name: LEBRON, JOSE M
Address: 2100 SALZEDO STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete
Name: LEBRON, PAOLA A
Address: 2100 SALZEDO STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: TD ( ) Delete
Name: VIVES, ZAMAR
Address: 2100 SALZEDO STREET
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GUZMAN, ZORAIDA
Address: 16503 SW 67 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: VD (X) Change ( ) Addition
Name: LEBRON, JOSE M
Address: 16503 SW 67 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: SD (X) Change ( ) Addition
Name: LEBRON, PAOLA A
Address: 16503 SW 67 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: TD (X) Change ( ) Addition
Name: VIVES, ZAMAR
Address: 16503 SW 67 TERRACE
City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZORAIDA GUZMAN PD 04/05/2005

Electronic Signature of Signing Officer or Director — Date