## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000101739

Entity Name: ZABETH, INC.

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16330 N E 2ND AVE MIAMI, FL 33162

Current Mailing Address: New Mailing Address:

16330 N E 2ND AVE MIAMI, FL 33162

FEI Number: 56-2443594 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ST JULES, GUSTAV M DR
9801 N MIAMI AVE
MIAMI, FL 33150 US

ST JULES, GUSTAV M DR
16330 N E 2ND AVENUE
MIAMI, FL 33162 US

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: GUSTAV M. ST JULES 01/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title: ST JULES, GUSTAV M DR ST JULES, GUSTAV M DR Name: Name: 9801 N MIAMI AVE 16330 N E 2ND AVENUE Address: Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33162

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: ST JULES, MONKRUMAN B Name: ST JULES, MONKRUMAN B Address: 9801 N MIAMI AVE SADD AVENUE

Address: 950 TN MIAMI AVE Address: 1530 N E 2ND AVENUE
City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33162

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition Name: BALLA, DIDA Name: BALLA, DIDA

Address: 9801 N MIAMI AVE Address: 16330 N E 2ND AVENUE

City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GUSTAV M. ST. JULES DP 01/06/2006