

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138557

Entity Name: ZACOR INVESTMENTS, INC

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

17150 COLLINS AVE,
101-323
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17150 COLLINS AVE,
101-323
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 13-4277200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRAYZHILOVA, NATALYA
17150 COLLINS AVE,
101-323
SUNNY ISLES BEACH, FL 33160 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRAYZHILOVA, NATALYA
Address: 17150 COLLINS AVE, 101-323
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VP () Delete
Name: MIRER, OLGA
Address: 16500 COLLINS AVE, # 855
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VPO () Delete
Name: GOLDBERG, TAMARA
Address: 12150 COLLINS AVE., STE 101-323
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PRAYZHILOVA NATALYA

P

05/01/2005

Electronic Signature of Signing Officer or Director

_____ Date