

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020509

Entity Name: ZAMBESI, INC.

FILED
Mar 25, 2005
Secretary of State

Current Principal Place of Business:

100 N.W. 108TH TERRACE
SUITE 207
PEMBROKE PINES, FL 33025

New Principal Place of Business:

17000 SW 90 AVE
MIAMI, FL 33157

Current Mailing Address:

100 N.W. 108TH TERRACE
SUITE 207
PEMBROKE PINES, FL 33025

New Mailing Address:

PO BOX 5032
DEERFIELD BEACH, FL 33442

FEI Number: 20-0672895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICKARD, GLENN E
100 N.W. 108TH TERRACE
SUITE 207
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

PICKARD, GLENN E
17000 SW 90 AVE
MIAMI, FL 33157 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: _____

03/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PICKARD, GLENN E
Address: 100 N.W. 108TH TERRACE, SUITE 207
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PICKARD, GLENN E
Address: 17000 SW 90 AVE
City-St-Zip: MIAMI, FL 33157

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: GLEN PIKARD

PRES

03/25/2005

Electronic Signature of Signing Officer or Director

Date