


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000054066	
1. Entity Name ZIMA I, INC.	

Principal Place of Business 1567 PRESIDENTIAL WAY MIAMI, FL 33179 US	Mailing Address 1567 PRESIDENTIAL WAY MIAMI, FL 33179 US
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DO NOT WRITE IN THIS SPACE



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1092014	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BENTATA, ARIEL J
664 EAST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009

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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 typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1110000405362 02/07/06-60062-007 150.00
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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GOLDSTEIN, DANIEL
STREET ADDRESS	1567 PRESIDENTIAL WAY
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	VP
NAME	HAFETZ, CLAUDETTE
STREET ADDRESS	1567 PRESIDENTIAL WAY
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:  **DATE** 1/24/06 **Daytime Phone #** 305-469-0154