## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000069148

Entity Name: ZUIN SERVICES, INC.

City-St-Zip:

FILED Feb 26, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3920 A N.W. 110 AVENUE CORAL SPRINGS, FL 33065 US **Current Mailing Address: New Mailing Address:** 3920 A N.W. 110 AVENUE CORAL SPRINGS, FL 33065 US FEI Number: 20-2822634 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: RODRIGUEZ, JOSEFA 3920 A N.W. 110 AVENUE CORAL SPRINGS, FL 33065 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: (X) Change ( ) Addition RODRIGUEZ, JOSEFA RODRIGUEZ, JOSEFA Name: Name: 3920 A N.W. 110 AVENUE 3920 A N.W. 110 AVENUE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 US City-St-Zip: CORAL SPRINGS, FL 33065 US Title: VΡ Title: () Delete () Change () Addition Name: ZUIN. JOSE Name: 3920 A N.W. 110 AVENUE Address: Address: CORAL SPRINGS, FL 33065 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition ZUIN, ANTONELLA Name: Name: 3920 A N.W. 110 AVENUE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 US City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition ZUIN, ANDREA C Name: Name: Address: Address: 3920 A N.W. 110 AVENUE

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

CORAL SPRINGS, FL 33065 US

SIGNATURE: JOSEFA RODRIGUEZ PD 02/26/2009