

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000096169

FILED
Mar 29, 2007
Secretary of State

Entity Name: ZEUS ENTERPRISES SALES, INC.

Current Principal Place of Business:

6994 46TH AVE NORTH
ST PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

3000 56TH AVE NORTH
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 20-3109213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, DONALD R
32 21ST STREET NORTH
ST PETERSBURG, FL FL 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHRANS, TRAVIS E
Address: 3000 56TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: VP () Delete
Name: SCHRANS, TRAVIS E
Address: 3000 56TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: T () Delete
Name: SCHRANS, TRAVIS E
Address: 3000 56TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: S () Delete
Name: SCHRANS, TRAVIS E
Address: 3000 56TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

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:

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 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: TRAVIS SCHRANS

PRES

03/29/2007

Electronic Signature of Signing Officer or Director

Date