

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130611

Entity Name: ZECABEE, ENTERPRISES INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1763 ELBERT ACRES CT NE
WINTERHAVEN, FL 33881

New Principal Place of Business:

3600 QUEENS COVE BLVD
WINTERHAVEN, FL 33880

Current Mailing Address:

1763 ELBERT ACRES CT NE
WINTERHAVEN, FL 33881

New Mailing Address:

3660 QUEENS COVE BLVD
WINTERHAVEN, FL 33880

FEI Number: 01-0859776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, LULA W
2393 4TH ST NE
WINTER HAVEN, FL 33881 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: D () Delete
Name: WILLIAMS, WILLIE
Address: P.O.BOX 10121
City-St-Zip: WINTER HAVEN, FL 33885

Title: D () Delete
Name: WILLIAMS, LATIKI
Address: P.O.BOX 10121
City-St-Zip: WINTER HAVEN, FL 33885

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, WILLIE
Address: 3660 QUEENS COVE BLVD
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: WILLIAMS, LATIKI
Address: 3600 QUEENS COVE BLVD
City-St-Zip: WINTER HAVEN, FL 33880

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.

SIGNATURE: LATIKI M. WILLIAMS

E.O.

04/30/2008

Electronic Signature of Signing Officer or Director

Date