

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000151699

Entity Name: ZION RESTORATION INC.

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

5106 PIER DR
GREENACRES, FL 33463 US

New Principal Place of Business:

379 SW DE GOUVEA TERRACE
PORT SAINT LUCIE, FL 34984 US

Current Mailing Address:

5106 PIER DR
GREENACRES, FL 33463 US

New Mailing Address:

379 SW DE GOUVEA TERRACE
PORT SAINT LUCIE, FL 34984 US

FEI Number: 20-8010971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZELAYA, EVELYN
5106 PIER DR
GREENACRES, FL 33463 US

Name and Address of New Registered Agent:

ZELAYA, EVELYN
379 SW DE GOUVEA TERRACE
PORT SAINT LUCIE, FL 34984 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: EVELYN ZELAYA

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZELAYA, EVELYN
Address: 5106 PIER DR
City-St-Zip: GREENACRES, FL 33463 US

Title: VP () Delete
Name: ZELAYA, ROGER
Address: 5106 PIER DR
City-St-Zip: GREENACRES, FL 33463 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZELAYA, EVELYN
Address: 379 SW DE GOUVEA TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 34984 US

Title: VP (X) Change () Addition
Name: ZELAYA, ROGER
Address: 379 SW DE GOUVEA TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 34984 US

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: EVELYN ZELAYA

P

04/17/2008

Electronic Signature of Signing Officer or Director

Date