

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000110630

Entity Name: ZAIONZ CORP

FILED  
Apr 17, 2010  
Secretary of State

**Current Principal Place of Business:**

1690 NE 191 STREET  
B1-103  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

1690 NE 191 STREET  
B1-103  
NORTH MIAMI BEACH, FL 33179

FEI Number: 26-3940458

FEI Number Applied For ( )

**New Principal Place of Business:**

16950 NORTH BAY ROAD  
614  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

16950 NORTH BAY ROAD  
614  
SUNNY ISLES BEACH, FL 33160

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZAIONZ, JULIA M  
1690 NE 191 STREET  
B1-103, FL 33179 US

**Name and Address of New Registered Agent:**

ZAIONZ, JULIA M  
16950 NORTH BAY ROAD  
614  
SUNNY ISLES BEACH, FL 33160 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

04/17/2010

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ZAIONZ, JULIA M MRS  
Address: 16950 NORTH BAY ROAD #614  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: JULIA M ZAIONZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS

04/17/2010

\_\_\_\_\_  
Date