


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P33742 1. Entity Name ZAPATA CLOSURES, INC.	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 05 NOV 21 AM 11:35

Principal Place of Business 2699 S. BAYSHORE DRIVE PENTHOUSE B COCONUT GROVE FL 33133 US	Mailing Address 2699 S. BAYSHORE DRIVE PENTHOUSE B COCONUT GROVE FL 33133 US
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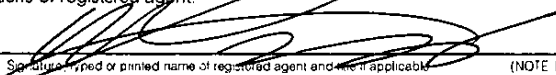
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

REINSTATEMENT

4. FEI Number 13-3147913		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired - <input type="checkbox"/> \$8.75 Additional Fee Required		

5. Name and Address of Current Registered Agent LAGUNA, MILAGROS 2699 S. BAYSHORE DRIVE PENTHOUSE B MIAMI FL 33133	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **9/1/05**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 DUE BY September 7, 2005
 Make Check Payable to Florida Department of State

S. 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	TITLE	
NAME	ZAPATA-AKINCILAR, HERNAN	NAME	
STREET ADDRESS	2699 S. BAYSHORE DRIVE, PENTHOUSE B	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33133	CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S	TITLE	
NAME	LAGUNA, MILAGROS	NAME	
STREET ADDRESS	2699 S. BAYSHORE DRIVE, PENTHOUSE B	STREET ADDRESS	
CITY-ST-ZIP	COCONUT GROVE FL 33133	CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
			500060189025
			10/03/05--01064--010 ***150.00
			500060189025
			11/21/05--01045--021 ***600.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: **9/1/05**