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FILED

Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000021427 (8)

1. Corporation Name  
ZP XXI INTERNATIONAL, INC.



Principal Place of Business

4014 CHASE AVE.  
SUITE 212  
MIAMI BEACH FL 33140  
US

Mailing Address

4014 CHASE AVE.  
SUITE 212  
MIAMI BEACH FL 33140-3446  
US

3. Date Incorporated or Qualified  
03/23/1993

3a. Date of Last Report  
03/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number  
65-0436228

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☒ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BONNIN, PETER P  
5300 NW 77TH CT  
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☒ DELETE  
NAME BIJOS, JOSE LUIZ G.  
STREET ADDRESS 5401 COLLINS AVE., #820  
CITY-ST-ZIP MIAMI BEACH FL

TITLE DVS ☒ DELETE  
NAME BIJOS, LUIZ R  
STREET ADDRESS 5401 COLLINS AVE APT 822  
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE M/P ☒ Change ☐ Addition  
1.2 NAME BIJOS, JOSE LUIZ G.  
1.3 STREET ADDRESS 5401 COLLINS AVE. # 820  
1.4 CITY-ST-ZIP MIAMI BEACH - FL - 33140

2.1 TITLE T ☒ Change ☐ Addition  
2.2 NAME BIJOS, LUIZ R.  
2.3 STREET ADDRESS 5401 COLLINS AVE. # 822  
2.4 CITY-ST-ZIP MIAMI BEACH - FL - 33140

3.1 TITLE V ☐ Change ☒ Addition  
3.2 NAME LOPEZ, HECTOR L.  
3.3 STREET ADDRESS 21468 SW 88 AV.  
3.4 CITY-ST-ZIP MIAMI - FL - 33189

4.1 TITLE S ☐ Change ☒ Addition  
4.2 NAME REYES, IBOR  
4.3 STREET ADDRESS 7135, COLLINS AVE. # PH1  
4.4 CITY-ST-ZIP MIAMI BEACH - FL - 33140

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/18/97

305-6735434

Date

Daytime Phone #

CR2E034 (9/96)