

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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95 APR 21 PM 1:50

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P93000049263 (5)

1. Corporation Name

ZOLLIN LAND - ENTERPRISES, INC.

Principal Place of Business

**8379 N.W. 14 ST.
CORAL SPRINGS FL 33065**

Mailing Address

**8379 N.W. 14 ST.
CORAL SPRINGS FL 33065**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/13/1993

3a. Date of Last Report
05/23/1994

4. FEI Number
65-0423131

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

2. Principal Place of Business
21 **122 Isle of Venice**

2a. Mailing Address
26 **122 Isle of Venice**

Suite, Apt. #, etc.
22 **Apartment #4**

Suite, Apt. #, etc.
27 **Apartment #4**

City & State
23 **Fort Lauderdale, Florida**

City & State
28 **Fort Lauderdale, Florida**

Zip
24 **33301**

Country
25 **USA**

Zip
29 **33301**

Country
30 **USA**

9. Name and Address of Current Registered Agent

**CASE, JOHN W
2400 E. COMMERCIAL BLVD.
SUITE 828
FORT LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name
same
82 Street Address (P.O. Box Number is Not Acceptable)
**2900 East Oakland Park Blvd.
Third Floor**
83 City
Fort Lauderdale
84 State
FL
85 Zip Code
USA

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 (hand or printed name of registered agent and filer if applicable)

(NOTE: Registered Agent signature required when handling)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**DPV
ZOLLIN, ULRICH
8379 N.W. 14TH ST.
CORAL SPRINGS FL 33065**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**ST
ZOLLIN, BEATE S
8379 N.W. 14TH ST.
CORAL SPRINGS FL 33065**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**SAME
SAME (Zollin, Ulrich)
122 Isle of Venice, Apt. #4
Fort Lauderdale, Florida 33301** ☒ Change ☐ Addition

2.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**SAME
SAME (Zollin, Beate S)
122 Isle of Venice, Apt. #4
Fort Lauderdale, Florida 33301** ☐ Change ☐ Addition

3.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ Change ☐ Addition

5.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ Change ☐ Addition

6.1 TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Ulrich Zollin
ULRICH ZOLLIN

April 18, 1995 305-564-0550