

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

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AND
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95 APR 11 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000055137 (2)

1. Corporation Name

ZEDCO INTERNATIONAL CORP.

Principal Place of Business

5020 NW 79TH AVE
BLDG. 7, STE. 205
MIAMI FL 33166
US

Mailing Address

5020 NW 79TH AVE
BLDG 7 STE. 205
MIAMI FL 33166
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0462055

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 8312 NW 56th STREET

2a. Mailing Address

26 8312 NW 56th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 MIAMI - FL

City & State

28 MIAMI - FL

Zip

Country

24 33166

25 U.S.

Zip

Country

29 33166

30 U.S.

9. Name and Address of Current Registered Agent

ZAMITH, PAULO C
5020 NW 79TH AVE.
BLDG. 7 STE. 205
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

ZAMITH, PAULO C.

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

8312 NW 56th STREET

83

84 City

MIAMI

85

Zip Code

FL 33166

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

Paulo C. Zamith

PAULO C. ZAMITH

02/28/95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	ZAMITH, PAULO C
STREET ADDRESS	5020 NW 79 AVE BLDG 7 SUITE 101
CITY - ST - ZIP	MIAMI FL 33166
TITLE	VD
NAME	VELAZQUEZ, SILVERIO D
STREET ADDRESS	5020 NW 79 AVE BLDG 7 SUITE 101
CITY - ST - ZIP	MIAMI FL 33166
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	PSD	☒ Change ☐ Addition
1.2 NAME	ZAMITH, PAULO C.	
1.3 STREET ADDRESS	8312 NW 56th STREET	
1.4 CITY - ST - ZIP	MIAMI - FL 33166	
2.1 TITLE	VD	☒ Change ☐ Addition
2.2 NAME	VELAZQUEZ, SILVERIO D.	
2.3 STREET ADDRESS	8312 NW 56th STREET	
2.4 CITY - ST - ZIP	MIAMI - FL 33166	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Paulo C. Zamith

PAULO C. ZAMITH

02/28/95

(305) 4719510

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR