FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 AM 11:47

DOCUMENT # **P93000079365 (1)**

1. Corporation Name
ZIM CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
1427 SE EIGHTH AVE APT 101 DEERFIELD BEACH FL 33441	5220 NW 77TH CT POMPANO FL 33073 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **11/17/1993**
3a. Date of Last Report: **04/29/1994**

2. Principal Place of Business	2a. Mailing Address
21 1265 S.E. 8th STREET	26 1265 S.E. 8th STREET
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 DEERFIELD Bch.	City & State 28 DEERFIELD Bch.
Zip 24 33441	Zip 29 33441
Country 25 BROWARD	Country 30 BROWARD

4. FEI Number: **65-0452106** ☐ 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

GIRARD, DANIEL
1427 SE EIGHTH AVE
APT 101
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name: GIRARD, DANIEL
82 Street Address (P.O. Box Number is Not Acceptable): 1265 S.E. 8th STREET
83
84 City: DEERFIELD Bch FL 85 Zip Code: 33441

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☑ Change ☐ Addition
NAME	GIRARD, DANIEL	1.2 NAME	GIRARD, DANIEL
STREET ADDRESS	5220 NW 77TH CT	1.3 STREET ADDRESS	1265 S.E. 8th STREET
CITY-ST-ZIP	POMPANO FL	1.4 CITY-ST-ZIP	DEERFIELD Bch, FL 33441
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: Daniel Girard Sr. 4/1/95 345-48-2520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0115061 CF