

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000052416 (2)

1. Corporation Name

Z INC. CONTEMPORARY ART

Principal Place of Business

Mailing Address

4506 HIGHWAY 20 EAST SUITE 200
NICEVILLE FL 32578

P O BOX 5176
NICEVILLE FL 32578

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/12/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-3254895

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZIVAN, JEROME A
4506 HIGHWAY 20 EAST SUITE 200
NICEVILLE FL 32578

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 registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE JEROME A. ZIVAN, PRESIDENT
NAME 4400 HIGHWAY 20 EAST, SUITE 304
STREET ADDRESS NICEVILLE, FL 32578
CITY ST ZIP

11 TITLE ☐ Change ☐ Addition

TITLE SECRETARY
NAME HELENE R. HARRIS
STREET ADDRESS 4400 HIGHWAY 20 EAST, SUITE 304
CITY ST ZIP NICEVILLE, FL 32578

12 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

14 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

15 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

16 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

17 TITLE ☐ Change ☐ Addition

REMITTED BY MAY 1

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number