

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P94000068682**1. Entity Name
ZO-K, INC.**FILED**
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90055 020 ***158.75

0111143

Principal Place of Business
**8362 PINES BLVD
SUITE 124
PEMBROKE PINES FL 33024
US**Mailing Address
**1141 NW 84 TERR
PEMBROKE PINES FL 33024**2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0521974**
Applied For
Not Applicable5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required.**6. Name and Address of Current Registered Agent
**WHITE, NONA J., TRUSTEE
UNDER THE N.J.WHITE REVOCABLE TRUST
1141 NW 84 TERR
PEMBROKE PINES FL 33024**7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**11. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PTSD WHITE, NONA J 1141 NW 84TH TERRACE PEMBROKE PINES FL 33024 ☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PTSD WHITE, NONA J, Trustee UNDER The Nona J White Revocable Trust 1141 N.W. 84th Terrace Pembroke Pines, FL 33024 ☒ Change ☒ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nona J. White, Trustee Under the Nona J White Revocable Trust (Pres.) **NONA J. WHITE, Trustee** 1-05-01 (954) 436-4816
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)