## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 14, 2008 08:00 AM DOCUMENT # P94000073766 **Secretary of State** 1. Entity Name ISLAND ZEPHYR ENTERPRISES, INC. Principal Place of Business Mailing Address 23287 WATER CIRCLE 23287 WATER CIRCLE BOCA RATON, FL. 33486 US BOCA RATON, FL 33486 US No Chg-P CR2E034 (11/05) 01072008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0526283 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KNICKERBOCKER, DOUGLAS H DO NOT WRITE 32387 WATER CIRCLE BOCA RATON, FL 32486 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) J00000927559 9. Election Campaign Financing \$5,00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE KNICKERBOCKER, DOUGLAS H STREET ADDRESS 23287 WATER CIRCLE CITY-ST-ZIP BOCA RATON, FL 33486 TITLE NAME KNICKERBOCKER, ELIZABETH S STREET ADDRESS 23287 WATER CIRCLE CITY-ST-ZP BOCA RATON, FL 33486 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP