

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000092331 (5)

1. Corporation Name

Z ENTERPRISES, INC.



Principal Place of Business

Mailing Address

3649 HWY 17 S
STE 4
ORANGE PARK FL 32073
US

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STE 4
ORANGE PARK FL 32073
US

3. Date Incorporated or Qualified

12/22/1994

3a. Date of Last Report

03/22/1995

4. FEI Number

59-3297061

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

2. Principal Place of Business

2a. Mailing Address

21 1179 Blanding Blvd
Suite, Apt. #, etc.

26 1179 Blanding Blvd
Suite, Apt. #, etc.

22 Suite 25

27 Suite 25

23 City & State

28 City & State

23 Orange Park Fl.

28 Orange Park Fl.

24 Zip

25 Country

29 Zip

30 Country

24 32065

25 Fla.

29 32065

30 Fla.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANTORO, THOMAS C
1700 WELLS RD., SUITE 5
ORANGE PARK FL 32073

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

ALVIN ZIEGENBEIN

(NOTE: Registered Agent signature required when changing)

4/14/96

12. OFFICERS AND DIRECTORS

TITLE P
NAME ZIEGENBEIN, AL
STREET ADDRESS 380 PERTHSHINE DR
CITY-ST-ZIP ORANGE PARK FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/96

904 276-8005

CR2E034 (12/95)