

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P94000094120 (0)

1. Corporation Name

ZCX INC.

95 MAY -1 PM 12: 03

Principal Place of Business

2401 S.W. 31ST AVE.
PEMBROKE PINES FL 33009

PARK

Mailing Address

2401 S.W. 31ST AVE.
PEMBROKE PINES FL 33009

PARK

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1994

3a. Date of Last Report

2. Principal Place of Business

21 2401 S.W. 31ST AVE.

2a. Mailing Address

26 2401 S.W. 31ST AVE

Suite, Apt. #, etc.

22 BLDG. H

Suite, Apt. #, etc.

27 BLDG. H

City & State

23 PEMBROKE PARK, FL.

City & State

28 PEMBROKE PARK, FLA.

Zip

24 33009

Country

25 U.S.A.

Zip

29 33009

Country

30 U.S.A.

4. FEI Number

65-0572397

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

9. This corporation has liability for interstate tax under S. 190.072.

Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name DAVID WINGARD, PRES. STS REALTY
82 Street Address (P.O. Box Number is Not Acceptable) STS REALTY INC. 801 BRICKELL AVE.
83 9TH FLOOR
84 City MIAMI FL 85 Zip Code 33131

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

DAVID WINGARD

David Wingard 3/29/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	NAGHOSSI, ENTERAM
STREET ADDRESS	2401 S.W. 31ST AVE.
CITY - ST - ZIP	PEMBROKE PINES FL 33009
TITLE	PARK
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	VICE PRESIDENT
NAME	SAM JAZAYRI
STREET ADDRESS	2401 SW 31ST AVE
CITY - ST - ZIP	PEMBROKE PK FL 33009
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	PEMBROKE PARK, FL 33009
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. 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)(b), 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:

SAM JAZAYRI

Sam Jazayri

3/29/95

981-1154

SIGNATURE AND TYPED FULL NAME OF SIGNING OFFICER AND DIRECTOR

Date

Telephone #