

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 # **P95000005686 (7)**

1. Corporation Name

**U WANNA IGUANA, INC.**



Principal Place of Business

Mailing Address

**969 NORTHEAST 45TH STREET  
FORT LAUDERDALE FL 33334**

**969 NORTHEAST 45TH STREET  
FORT LAUDERDALE FL 33334**

3. Date Incorporated or Qualified

**01/23/1995**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**65-0551456**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. 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

**AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

**JOSEPH J. ZELENKA  
469 N.E. 45TH ST.  
FT. LAUDERDALE, FL  
33334**

81

Name

**JOSEPH J. ZELENKA**

82

Street Address (P.O. Box Number is Not Acceptable)

**469 N.E. 45TH ST**

83

84

City

**FT. LAUDERDALE**

FL

85

Zip Code

**33334**

11. Pursuant to the provisions of Sections 607.0507 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

**JOSEPH J. ZELENKA**

*Joseph J. Zelenka*

**4/30/96**

Signature, typed or printed name of registered agent and Director (if applicable)

Signature, typed or printed name of registered agent and Director (if applicable)

Date

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

**P**

NAME

**ZELENKA, JOSEPH J**

STREET ADDRESS

**969 NORTHEAST 45TH STREET**

CITY - ST - ZIP

**FORT LAUDERDALE FL 33334**

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

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CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**900001862129  
-06/14/96--01034--031  
\*\*\*200.00**

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:

*Joseph J. Zelenka*  
**JOSEPH J. ZELENKA**

**4/30/96**

Date

Daytime Phone #

CR2E034 (12/95)