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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000011841 (0)

DOCUMENT #

STREET ADDRESS

ZID, INC.

	LL Piers Address
Principa! Place of Business	Mailing Address
961 S. ANDREWS AVE. POMPANO BEACH FL 33069	851 S. ANDREWS AVE. POMPANO BEACH FL 33069

FUMITAINU U	JENOTT IE GOOD				I			
					 Date Incorporated or Qualified 02/10/1995 	3a. Date	of Last Rep	ort
					4. FEI Number		Ap	plied For
2. Principal Plac	ce of Business	2a. Mailing Address			105-04420	33	L	t Applicable
i]		26			\$8.75 Additi			Additional
Suite, Apt. #,	, etc.	Suite, Apt. #, elc.		Certificate of Status Desired Fee Required				
27				6. Election Campaign Financing 55.00 May Be				May Be
City & State		City & State			Trust Fund Contribution C Added to Fees			-
3		28	Countr		8. This corporation has liability for	intangible ta	x under s 1	99.032,
Zφ	Country	Zip		у	Florida Statutes Yes	s []No		
4	25	29	30		10. Name and Address of New I	Registered	Agent	
	9. Name and Address of Current	Hegistereo Ageilt	8	1 Name				
			Į*	1				
	CK, GREGG		8	2 Street Add	ress (P.O. Box Number is Not Accepta	tH 0]		
	ANDREWS AVE.		_					
POMP/	ANO BEACH FL 33069		8	3				
,			8	4 City		FI	85 Zip	Code
	o the provisions of Sections 607.0502 a		1-	1 1			<u>- </u>	-i-tad off
familiar witi	o the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida h, and accept the obligations of, Sectio	11 007 .0000, 1 101.00	-					
SIGNATURE ,	Signature, typed or printed name of registered agent a	no tite il applicable (NC	OTE: Registered A	gent signature requir	red when reinstating)	DATE	D DIDECTO	20 INI 12
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICENS AND	Change	Addition
TITUE	D	☐ DELE'E	1, 130	.F			[_] Change	L.J Macinor
NAME	WALLICK, GREGG		1.2 NAM	SE .				
STREET ADDRESS	951 S. ANDREWS AVE.		1.3 STR	EET ADDRESS				
-	POMPANO BEACH FL 3306	9	1.4 CIT	r-ST-ZIP		7. N		Additio
CITY - ST - ZIP	SECRETARY TREASURE		2 1 717	LE .	SECRETARY TREASUR SHIRLEY D. LITTLE 951 S. ANDREWS	EERS	Change	Y AUGILIO
	1 1	F	2.2 NAI	AE	SHIPLEY D. LITTLE	Ansi		
NAME	OFICE ANDREW	s Ave	2.3 STF	EET ADDRESS	951 S. ANDRUUS	1100	- 4	
STREET ADDRESS	951S. ANDREW POMPANO BEACH	11 E 33069	2 4 CIT	Y-ST-ZIF	POMPANO BEACH FL	<u>. 33</u>	069	
CITY - S1 - ZIP	POMPADO BEACA	DELETE	3 1 Til	LE			Change	Additio
TITLE	1		3.2 NA	VE				
NAME			3 3. ST	ree1 address				
STREET ADDRESS			3.4 CIT	Y-ST-ZIP				
CITY-ST-ZIP		DELETE	4. 1 Ti				☐ Change	Addition
TITLE	1		4.2 NA	ME	2000017 -04/29/960	'98E	31,2	
NAME				REET ADDRESS	-04/29/960	1044	021	
STREET ADDRESS				Y-ST-ZIF	***200.00			
CITY-ST-7IP		I DELETE	5 1 Ti				Change	☐ Additi
TITLE		T1 2.22.0	52 N/	1				
NAME				REET ADDRESS				
STREET ADDRESS			1					
CITY-ST-ZIP		בין טרי בינ		TY-ST-ZiP			☐ Change	☐ Additi
TITLE		DELETE	6 1 T					
NAME			6.2 N	1				
CTOFF & ADDRESS	.		6.3 S	REET ADDRESS				

64 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)(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 certify 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 Ellock 12 or Block 13 if changed, or on an attrachment with an address.

SIGNATURE