

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000029942 (6)**

1. Corporation Name
STEVEN ZAJAS, P.A.



Principal Place of Business: **8951 BONITA BEACH RD. #525-177 BONITA SPRINGS FL 33923**
Mailing Address: **8951 BONITA BEACH RD. #525-177 BONITA SPRINGS FL 33923**

3. Date Incorporated or Qualified: **04/17/1995**
3a. Date of Last Report: _____
4. FEI Number: **65-0573242**
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. Suite, Apt. #, etc.: _____
22. City & State: _____
23. Zip: _____ Country: _____
24. _____ 25. _____ 26. _____ 27. _____ 28. _____ 29. _____ 30. _____

9. Name and Address of Current Registered Agent
**ZAJAS, STEVEN
4947 TAMiami TRAIL NORTH
NAPLES FL 33940**

10. Name and Address of New Registered Agent
81. Name: **Steven Zajas**
82. Street Address (P.O. Box Number is Not Acceptable): **8951 Bonita Beach Rd**
83. **#525-177**
84. City: **Bonita Springs** FL 85. Zip Code: **33923**

11. Pursuant to the provisions of Sections 607.0562 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 607.0805, Florida Statutes.

SIGNATURE: *Steven Zajas* PRES **Steven Zajas** DATE: **2/5/96**

12. OFFICERS AND DIRECTORS

NAME: PVST ZAJAS, STEVEN	<input type="checkbox"/> DELETE
STREET ADDRESS: 4947 TAMiami TRAIL NORTH NAPLES FL 33940	
CITY-STATE-ZIP: D	<input type="checkbox"/> DELETE
NAME: ZAJAS, STEVEN	
STREET ADDRESS: 4947 TAMiami TRAIL NORTH NAPLES FL 33940	
CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE
NAME: _____	
STREET ADDRESS: _____	
CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE
NAME: _____	
STREET ADDRESS: _____	
CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE: _____	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME: _____	
13. STREET ADDRESS: 8951 Bonita Beach Rd. #525-177	
14. CITY-STATE-ZIP: Bonita Springs, FL 33923	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
21. TITLE: _____	
22. NAME: _____	
23. STREET ADDRESS: 8951 Bonita Beach Rd. #525-177	
24. CITY-STATE-ZIP: Bonita Springs, FL 33923	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31. TITLE: _____	
32. NAME: _____	
33. STREET ADDRESS: _____	
34. CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41. TITLE: _____	
42. NAME: _____	
43. STREET ADDRESS: _____	
44. CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51. TITLE: _____	
52. NAME: _____	
53. STREET ADDRESS: _____	
54. CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61. TITLE: _____	
62. NAME: _____	
63. STREET ADDRESS: _____	
64. CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: *Steven Zajas* PRES **Steven Zajas** DATE: **2/5/96**

CR2E034 (12/95)