2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000086625

Entity Name: ZIFGRO, INC.

FILED Jan 15, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Julieni Finicipai Flace di Business.	New Fillicipal Flace of Dusiliess

% TRIPP SCOTT CONKLIN & SMITH, P.A.% TRIPP SCOTT, P.A.110 SE 6TH STREET 15TH FLOOR110 SE 6TH STREET 15TH FLOORFT. LAUDERDALE, FL 33301USFT. LAUDERDALE, FL 33301US

Current Mailing Address:

% TRIPP SCOTT CONKLIN & SMITH, P.A.

110 SE 6TH STREET 15TH FLOOR

FT. LAUDERDALE, FL 33301 US

% TRIPP SCOTT, P.A.

110 SE 6TH STREET 15TH FLOOR

FT. LAUDERDALE, FL 33301 US

FEI Number: 65-0630589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GROSS, WILLIAM J
% TRIPP SCOTT CONKLIN & SMITH, P.A.
110 SE 6TH STREET, 15TH FLOOR
FT. LAUDERDALE, FL 33301 US

GROSS, WILLIAM J
% TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FT. LAUDERDALE, FL 33301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/15/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change () Addition

 Name:
 ZIFRONY, MATTHEW
 Name:

 Address:
 110 SE 6TH STREET 15TH FLOOR
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:

Title: DST () Delete Title: () Change () Addition

Name:GROSS, WILLIAM JName:Address:110 SE 6TH STREET 15TH FLOORAddress:City-St-Zip:FT. LAUDERDALE, FLCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW ZIFRONY D 01/15/2002