## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000087417 (8) Z. N. V. T., INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 21 1997 8:00am Secretary of State



FT. MYERS FL	TIAL COURT #109 33919	FT. MYERS FL 33919-3584					
					3. Date Incorporated or Qualified 11/15/1995	3a. Date of Lest 08/20/1996	Report
2. Principal P	lace of Businoss	2a. Mailing Address			4. FEI Number		Applied For
21 14044	CAPE CORAL PKWY	26 14044 CAPE CORAL PKWY			65-1619529	1	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional Required
22		City P. Steele					
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23 CAPE CORAL, FL Country		28 CAPE CORAL FL Country			8. This corporation has liability for intangible tax under s. 199.032,		
Zip			30 LEE		Florida Statutes		
24 33904	25 LEE 9. Name and Address of Current			ie	10. Name and Address of New Reg		
7040				81 Name			
ZBAR, STEPHEN 1404A CAPE CORAL PARKWAY				В	RIAN_NOEL_ dress (P.O. Box Number is Not Acceptab		
	E CORAL FL 33904		82 Street Add		dress (P.O. Box Number is Not Acceptable) 4044 CAPE CORAL PARKWAY		
UNF	E CONAL PL 33904			B3	4044 CAPE CORAL FA	WHYT	
				B4 City	1DE CODIT		Code
44 Durayant	to the provision of Sections 607 0502	and 607 1608 Florida Stat	utos the ab	ove-paged cor	APE CORAL	urnose of changing	its registered
office or r	egistered agent or both, in the State of	of Florida, Such change was	s authorized	by the corpora	rporation submits this statement for the palion's board of directors. I hereby accept	t the appointment a	s registered
agent. I a	m familiar Will, and a cept the obligat	ions of, Section 607.0505, I	Florida Statu	iles.		11 100	_
SIGNATURE	Signature, typed or printed name of registered agent	and tale if analyzable (Ne	OTF Repetated	Ango: signature regu	ulred when reinstating)	Fis 11,97	
12.	OFFICERS AND		13.	rige it agriculture rade	ADDITIONS/CHANGES TO OFFIC		
TOLE	DP	DELETE	1.1 TUT	.F		Change	Addition
NAME	NOEL, BRIAN	_	1.2 NA	NE I			
STREET ADDRESS	1404A CAPE CORAL PARKWAY	1.3 SIREE1		REET ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL 33904			Y-S1-ZIP			
TITLE	VD K DELETE		2.1 7(1)			Change	☐ Addition
NAME	ZBAR, STEPHEN		2.2 NA1	ME			
STREET ADDRESS	1404A CAPE CORAL PARKWAY		2.3 \$1F	REE1 ADORESS			
CITY-ST-ZIP	CAPE CORAL FL 33904			IY-\$T-ZIP			
TITLE		DELETE	3.11(1)			Change	Addition
NAME			3.2 NAI	ve			
STREET ADDRESS			3.3 S16	REET ADORESS			İ
CITY-ST-ZIP			3.4 CI	IY-ST-ZIP			
TITLE		DELETE	4.1101			Change	Addition
NAME			4. 2 NA	ME			j
STREET ADDRESS				REET ADDRESS			}
CITY-ST-ZIP			4.4 CIT	Y-S1-ZIF			
TITLE		DELETE	5.1 1(1)			☐ Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 \$16	REET ADDRESS			
CITY-\$T-ZIP			Į.	Y-ST-2IP			
TITLE		DELETE	6.1 1(1)			Change	Addition
NAME			6.2 NA	1		_	
STREET ADDRESS				REET ADDRESS			ŀ
				Y - \$1 - ZIP			
CITY-\$T-ZIP			6.4 CH	1.91.71			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or employ ental 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 ecciver or trusted 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 attrichment with an address.