


FILE NOW. FILING FEE AFTER MAIL IS \$550.00

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Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90069 033 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS																																																																																																																																																													
<b>DOCUMENT # P96000016699</b> ✓ 1. Corporation Name <b>ZAPATON ENTERPRISES, INC.</b>																																																																																																																																																															
Principal Place of Business 1398 N.W. 54TH STREET MIAMI FL 33142		Mailing Address 1398 N.W. 54TH STREET MIAMI FL 33142																																																																																																																																																													
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country																																																																																																																																																													
9. Name and Address of Current Registered Agent <b>RICARDO TABOADA</b> <b>1398 N.W. 54TH ST.</b> <b>MIAMI FL 33142</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Numbers Not Acceptable) 83 84 City State Zip Code																																																																																																																																																													
11. Pursuant to the provisions of Sections 607.0502 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 <i>X</i> _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)																																																																																																																																																															
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>P</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>TABOADA, RICARDO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>C/O 1398 N.W. 54TH ST.</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>MIAMI FL 33142</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	P	DELETE	NAME	TABOADA, RICARDO		STREET ADDRESS	C/O 1398 N.W. 54TH ST.		CITY-STATE-ZIP	MIAMI FL 33142		TITLE		DELETE	NAME			STREET ADDRESS			CITY-STATE-ZIP			TITLE		DELETE	NAME			STREET ADDRESS			CITY-STATE-ZIP			TITLE		DELETE	NAME			STREET ADDRESS			CITY-STATE-ZIP			TITLE		DELETE	NAME			STREET ADDRESS			CITY-STATE-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>P</td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>1.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td>RICARDO TABOADA</td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>2.2 NAME</td> <td>1398 N.W. 54TH</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td>MIAMI - FL 33142</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>3.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> </tr> </table>		1.1 TITLE	P	Change	Addition	1.2 NAME				1.3 STREET ADDRESS				1.4 CITY-STATE-ZIP				2.1 TITLE	RICARDO TABOADA	Change	Addition	2.2 NAME	1398 N.W. 54TH			2.3 STREET ADDRESS	MIAMI - FL 33142			2.4 CITY-STATE-ZIP				3.1 TITLE		Change	Addition	3.2 NAME				3.3 STREET ADDRESS				3.4 CITY-STATE-ZIP				4.1 TITLE		Change	Addition	4.2 NAME				4.3 STREET ADDRESS				4.4 CITY-STATE-ZIP				5.1 TITLE		Change	Addition	5.2 NAME				5.3 STREET ADDRESS				5.4 CITY-STATE-ZIP				6.1 TITLE		Change	Addition	6.2 NAME				6.3 STREET ADDRESS				6.4 CITY-STATE-ZIP			
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14. I 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 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, with all other like empowered.

SIGNATURE: *X* \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-08-99

Date

Daytime Phone #

CR2E034 (11/98)