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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000023129 (5)

ZENITH ENTERPRISES, CORP.

Principal Place of Business	S
-----------------------------	---

## **FILED** Jan 21 1998 8:00am Secretary of State



Principal Plac	e or business	Mailing Address				
7380 S.W. 161 PL. 7380 S.W. 161 PL.						
MIAMI FL 33193 MIAMI FL 33193			DO NOT WRITE IN THIS SPACE			
US		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
A Dringing D	lane of Overland	On Malling Address	<del></del>		03/14/1996	
	2. Principal Place of Business 22. Mailing Address 23. Mailing Address 25.				4. FEI Number Applied For	
					65-0664534 Not Applicable	
	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
	22 27				Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Pe	
23 / 14	ACEAH TE 33017		<del></del>		Trust Fund Contribution Added to Fees	
_ '	Zip Country Zip Cou			У	8. This corporation owes or has paid the current year Intangible	
24	25 QHOE	29	30		Personal Property Tax due June 30. Yes You	
	9. Name and Address of Current F	registered Agent	81	Name	10. Name and Address of New Registered Agent	
	rrer, osvaldo		[8]	Name		
738	0 S.W. 161 PL.		82	82 Street Address (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33193		L	<del></del>		
			83	1		
			84	City	85 Zip Code	
			"	City	FL   *	
11. Pursuant i	to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statu	tes, the abov	e-named	corporation submits this statement for the purpose of changing its registered	
Office of re	egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida Such change was ins of Section 607 0505. F	authorized b lorida Statute	y the corp	poration's board of directors. I hereby accept the appointment as registered	
-	The same with a second the configure					
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NO	TE: Registered Ag	ent signature	required when reinstating) DATE	
12.	OFFICERS AND D	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Р	DELETE	1.1 TITLE		. Change Addition	
NAME	FERRER, OSVALDO		1.2 NAME	ì		
STREET ADDRESS	7380 S.W. 161 PL.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-			
TITLE	ST	DELETE	2.1 TITLE	31-211	Change Addition	
NAME	FERRER, MARLENE		2.2 NAME			
STREET ADDRESS	7380 S.W. 161 PL.			T ADDRESS		
			4	ļ		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2. 4 CITY - 3.1 TITLE	SI-ZIP	Change Addition	
		□ beerie			Change — Roution	
NAME			3.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP		Distre	3.4. CITY-	S1-7IP	0	
TITLE		☐ DELETE	4.1 TITLE	ļ	☐ Change ☐ Addition	
NAME			4. 2 NAME	1		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TATLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP	-		5.4 CITY-	ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			62 NAME			
STREET ADDRESS			6.3 STREE	I ADDRESS		
CITY - ST - ZIP			6.4 CITY-			
OCCUPANT AND ADDRESS OF THE PARTY OF THE PAR		and the second second	0.4 0111	21.211	11. O - 12. 440 04(0V) FIE 11. OL 4 14. II 17. II 18.	

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 fals 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.