FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Aug 13, 2003 8:00 am Secretary of State P96000026311 DOCUMENT # 1. Entity Name 08-13-2003 90073 021 ***150.00 ZIMAK INCORPORATED Principal Place of Business Mailing Address 6005 NORTHWEST 170TH TERRACE 6005 NORTHWEST 1707H TERRACE MIAM! FL 33015 **MIAMI FL 33015** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0654214 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change Addition ☐ Delete ONONUJU, CHRISTOPHER U NAME NAME 6005 NORTHWEST 170TH TERRACE STREET ADDRESS STREET ADDRESS **MIAMI FL 33015** CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition ONONUJU, MAUREEN N NAME NAME 6005 NORTHWEST 170TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33015 CITY-ST-ZIP CITY-ST-ZIP STD SNONUTU, CHIJOKE Change TITLE ☐ Delete TITLE ☐ Addition ONONUJU. CHIJOKE NAME NAME 6005 NORTHWEST INOTH TERRACE 6005 NORTHWEST 170TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33015 33015 CITY-ST-ZIP CITY-ST-ZIP MIAMI ☐ Delete Change Addition ONONUJU, IBEZIMAKO NAME NAME 6005 NORTHWEST 170TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33015 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 report or supplemental 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 received printing steeper powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachry

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

DMPONONUTU,

Hetachment 80138080 HMI-1000

ZIMAK Inc 6005 NW 170 TERRACE MIAMI, FL 33015 08-10-03

INISION OF CORPORATIONS
LNIFORM BUSINESS REPORT FILINGS
1. D. BOX 1500
ALLAHASSEE, FL 32302-1500

EAR SIR/MADAM,

MY NAME IS MAUREEN ONONUSY, VICE PRESIDENT AND A SIRECTOR OF ZIMAK INC. THE CORPORATION DID NOT RECEIVE THE PRIOR

Sincerely

MAUREEN ONONUSU

Homey

· - -

•

.

.

.