

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

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthland
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000060625 (6)

1. Corporation Name

Z T ENTERPRISES, INC.



Principal Place of Business

P O BOX 574
LITHIA FL 33547

Mailing Address

P O BOX 574
LITHIA FL 33547-0574

2. Principal Place of Business

21 9402 E. Fowler Ave

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 City & State

23 City & State

Thonotassa FL

28 Zip

24 Zip

33592

25 Country

Hillborough

29 Zip

30 Country

9. Name and Address of Current Registered Agent

ZELLERS, KENNETH M
4102 SILVERCREST LN
BRANDON FL 33511

3. Date Incorporated or Qualified
07/18/1996

3a. Date of Last Report

4. FEI Number
59-3413899

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

31 Name

32 Street Address (P.O. Box Number is Not Acceptable)

34 City

FL

35

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP
President
Lester G. Traub
3932 Lithia Springs Road
Lithia, FL 33547

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP
SECRETARY/TREASURER
KENNETH M. ZELLERS
4102 SILVERCREST LANE
BRANDON, FL 33511

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
Street Address
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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.

SIGNATURE:

Lester G. Traub

3-12-97

(813)

653-2278

CR2E034 (9/96)