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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000067997 1. Corporation Name

EL ZORRO HOLDINGS CORPORATION

LL LOINIO (IGLO)					
Principal Place of Business	Mailing Address		TIESTIGHT NE THE STILL BEITT B		
13434 US HIWAY 19 HUDSON FL 34667 US	13434 US HIWAY 19 HUDSON FL 34667 US		DO NOT WRITE IN THIS SPACE		
ນຈ	•••		3. Date Incorporated or Qualifed 08/12/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For		
21	26		59-3396945 Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip Country		ountry	8. This corporation owes the current year Intangible Personal Property Tax.		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
RIOUR	1661001	81 Name			
SEALS N' SIGNATURES INC. EL 26822 22ND-AVE NOS COMPONATION SUITE 277		82 Street Addre	CREATER STATE OF THE STATE OF T		
		83			
ST PETERSBURG FL 33710	•	84 City	FL 85 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 of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purp

(% agent.) I am familiar with, and accept the obligations of Section 607.0505, Northal Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 733 455 DATE								
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF					
TITLE	P □ DELETE	1.1 TITLE	N 9000345	☐ Change ☐ Addition				
NAME	HUGILL, WILLIAM	1.2 NAME		· .				
STREET ADDRESS	11124 ADDISON ST	1.3 STREET ADDRESS	•	·				
CITY-ST-ZIP	SPRING HILL FL	1.4 CITY-ST-ZIP						
TITLE	VP DELETE	2.1 TITLE		☐ Change ☐ Addition				
NAME	HUGILL, KAREN A	2.2 NAME						
STREET ADDRESS	127 LILIAN AVE	2.3 STREET ADDRESS						
CITY-ST-ZIP		2.4 CITY-ST-ZIP						
TITLE	SYRACUSE NY 13206 STATES OF THE STATES OF TH	3.1 TITLE		☐ Change ☐ Addition				
NAME: SEA		3.2 NAME						
STREET ADDRESS	(整 的) 和建物 为5.500000000000000000000000000000000000	3.3 STREET ADDRESS	・絶数があまりでで、ショックはなるでして過	ro shin santann at a 102 Shirian iagi				
CITY-ST-ZIP.	E 277	3.4, CITY-ST-ZIP	्र विभिन्ने हिन्दी हैं।					
TITLE	ETTROURS IL MATE DELETE	4.1 TITLE	(1967) (2017) [2017] (1967) [2017]	Change 19 1 Addition				
		4.2 NAME	·					
NAME STREET ADDRESS	AY. 15 10904-03-942-1-1-15 10907 11-15-15-15-15-15-15-15-15-15-15-15-15-1	4.3 STREET ADDRESS		•				
CITY-ST-ZIP	Provi	4.4 CITY-ST-ZIP	·					
TITLE .	DELETE	5.1 TITLE	-	☐ Change ☐ Addition				
NAME	, '	5.2 NAME	"你""你"的"第一"。					
STREET ADDRESS		5.3 STREET ADDRESS		*				
CITY-ST-ZIP		5,4 CITY-ST-ZIP	G 999545					
TITLE	RECORDED, CONTRACTOR OF THE CO	6.1 TITLE		☐ Change ☐ Addition				
NAME	Antes Addison of	6.2 NAME						
STREET ADDRESS	DPRING HILL FL.	6.3 STREET ADDRESS						
CITY-ST-ZIP	VPOLIAN IN 12 DET	6.4 CITY+ST-ZIP		E. the anadify that the information				

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 arthural 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 receipter or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in

FILED

Jan 30, 1999 8:00am

Secretary of State

01-30-1999 90002 007 ***150.00