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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 09 1997 8:00am

Secretary of State

Secretify of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000075530 (1)

## **ZUMMAN & RAFSUN INC**

Principal Place of Business Mailing Address 522 S. VIEW DRIVE 522 S. VIEW DRIVE APT. B APT. B JUPITER FL 33458 JUPITER FL 33458-3580 3. Date Incorporated or Qualified 3a. Date of Last Report 09/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032. 24 Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHOWDHURY, MANJUR 81 Name 522 S. VIEW DRIVE Street Address (P.O. Box Number is Not Acceptable) APT. B 83 **JUPITER FL 33458** City 84 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 little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TOUR Change Addition CHOWDHURY, MANJUR NAME 1.2 NAME 522 S. VIEW DRIVE, APT. B STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP 1.4 DITY - ST - ZIP TITLE DELETE Change 211008 Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 THILE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-7IP DELETE TITLE Change 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-ZIP DELETE TITLE 6.1 THLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP

14. I do hereby certify that the information supplied with this filling 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 logal effect as if made under eath, 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.