

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000090027

FILED  
Feb 19, 2004  
Secretary of State

Entity Name: ZULED OFFICE SYSTEMS, INC.

## Current Principal Place of Business:

29343 S.W 152 AVE  
LEISURE CITY, FL 33033 US

## New Principal Place of Business:

1651 NE 8 STREET  
HOMESTEAD, FL 33030 US

## Current Mailing Address:

329 WEST PALM DRIVE  
FLORIDA CITY, FL 33034

## New Mailing Address:

FEI Number: 65-0713027      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERO, EDWIN  
331 WEST PALM DRIVE  
FLORIDA CITY, FL 33034 US

## Name and Address of New Registered Agent:

RIVERO, EDWIN  
329 WEST PALM DRIVE  
FLORIDA CITY, FL 33034 US

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.

SIGNATURE: EDWIN RIVERO

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RIVERO, EDWIN  
Address: 331 WEST PALM DRIVE  
City-St-Zip: FLORIDA CITY, FL 33034

Title: STD ( ) Delete  
Name: RODRIGUEZ, ZULMA  
Address: 331 WEST PALM DRIVE  
City-St-Zip: FLORIDA CITY, FL 33034

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RIVERO, EDWIN  
Address: 329 WEST PALM DRIVE  
City-St-Zip: FLORIDA CITY, FL 33034

Title: STD (X) Change ( ) Addition  
Name: RODRIGUEZ, ZULMA  
Address: 329 WEST PALM DRIVE  
City-St-Zip: FLORIDA CITY, FL 33034

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN RIVERO

PRES

02/19/2004

Electronic Signature of Signing Officer or Director

Date