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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000102290 (9)

ZIMMER ENTERPRISES, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principa: Place of Business			Mailing Address					
4651 BABCOCK ST. NE PALM BAY FL 32905			4651 BABCOCK ST. NE PALM BAY FL 32905					
Trial print	C VEGO	1 116	THE PATTE SESSON				DO NOT WRITE IN THIS \$PACE	
							3. Date Incorporated or Qualified	
							12/17/1996	
2. Principal P	ace of Business	2a. M	2a, Mailing Address				4. FEI Number Applied For	
21		├ ──¬	26				59-34 16248 Not Applicable	
Suite, Apt.	# atc		Suite, Apt. #, etc.				— \$9.75 Additional	
	#, G to.	├	27				5. Certificate of Status Desired Fee Required	
City & State	3		City & State					
	•	1	 '				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23] Z ip				Cou	ntru			
	— ·	<u> </u>	þ	├ ─┐	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. DX Yes No	
24	25 9. Name and Address of Currer	29	ad Assaul	30	30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
		it negister	eu Agent		81	Name	10. Name and Address of New Registered Agent	
	IMER, DIANE				ا'`	Name		
	75 LAKE WATERFORD WAY #2		82			Street Address (P.O. Box Number is Not Acceptable)		
ME	LBOURNE FL 32901							
					83		·	
					84	City	85 Zip Code	
					94	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.	1508, Florida Sta	lutes, the at		-named		
office or r	egistered agent, or both, in the State	of Florida	Such change wa	as authorized	d by	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
	m tamilar with, and accept the oblig	anons or, s	ecnon 6 07.05 0 5,	ribrida Stat	utes			
SIGNATURE	Signature, typed or printed name of registered agr	est prodition diag	rdenator (I	IOTE Pagistaras	1.600	at signature	required when reinstating) DATE	
12.	OFFICERS AN			13.	ngu	in signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0	12 (2) (2)	DELETE	1.1 10	ne.	1	Change Addition	
NAME	THE PLANE							
	4775 LAKE WATERFORD WA	V #2	1.2 NAME 1.3 STREET AL		1DODESO			
AICLDOUDNIC CLASSON			II II					
CITY-ST-ZIP			_	1.4 C(TY-ST-ZIP 2.1 T(TLE		☐ Change ☐ Addition		
TITLE						Change		
NAME					2.2 NAME			
STREET ADDRESS	REET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP	T-ZIP				2. 4 CITY - ST- ZIP			
TITLE .			☐ DELETE	3.1 T(1	LLE		Change Addition	
NAME				3.2 NA	ME			
STREET ADDRESS				3.3 \$1	REET	ADDRESS		
CITY-ST-ZIP			3.4. CI			T-ZIP		
TITLE			DELETE	DELETE 4.1 TIT			Change Addition	
NAME				. 4.2 N	AME			
STREET ADDRESS				4.3 ST	REET	ADDRESS		
CITY-ST-ZIP								
TITLE					4.4 C(TY - ST - ZIP 5.1 T(TLE		Change Addition	
NAME				5.2 NA				
1						ADODECC		
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP			OF STE	5.4 CI		I-ZIP	Channe Taddit-	
TITLE			☐ OELETÉ	, 6.1 TO			☐ Change ☐ Addition	
NAME				6.2 NA	ME			
STREET ADDRESS				6.3 ST	REET	ADDRESS		
CITY-ST-ZIP				6.4 CI	TY-\$	r-ZIP		
					_		d in Continue 440 07/09/). Florida Ctatutas, I further continue 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 of supplemental annual report is true and accurrate 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.