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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P97000001728 (9)

ZEM, INC. OF PANAMA CITY

FILED Apr 17 1998 8:00am Secretary of State



4-5-98

Principal Place	e of Business	Mailing Address		
456 HARRISC		13312 FRONT BEACH ROA		
PANAMA CIT	Y FL 32401	PANAMA CITY BEACH FL	32407	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/07/1997
9 Principal P	lace of Business	2s. Mailing Address		4. FEI Number Applied For
		— · · · · · · · · · · · · · · · · · · ·	1-1110-1	, , , , , , , , , , , , , , , , , , ,
		26 137 N. Bid - 1 Suite, Apt. #, etc.	1 WEE L	
Suite, Apt.	#, e tc.			5. Certificate of Status Desired See Required
22		27 Ch. 6 Ch.		
City & State			$- D_{\alpha \alpha} d_{\alpha} -$	6. Election Campaign Financing \$5.00 May Be
23 POWAL	ACITY BEACH IL	28 PANAMA CAT	Country Country	Trust Fund Contribution
Zip	Country	Zip	-	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No
24 3240		28 324 3 3	0	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	ABORS, SCOTT R		Vi Naii	0
456 HARRISON AVE			82 Stre	et Address (P.O. Box Number is Not Acceptable)
PANAMA CITY FL 32401				·
			83	
			84 City	85 Zip Code
			[0,1] 5,1,7	FL [3] Exposition
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 agent agent are title if applicable)				ure required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELETE	1.1 TITLE	P. Change Addition
NAME			1.2 NAME	ZAIDA L. CASANOVA-KISCON
STREET ADDRESS			1.3 STREET ADDRES	
CITY-ST-ZIP			1.4 CITY-ST-ZIP	PANAMA COLY BEACH FL. 32413
TITLE		DELETE	2.1 TITLE	V — T ☐ Change X Addition
NAME			2.2 NAME	Misuel A. Prascon
STREET ADDRESS			2.3 STREET ADDRES	$l_{i,n} = a_i + O_i + A_{i,n} + A_$
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	PANAUA City BEACH FL 32413
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	,
STREET ADDRESS			3.3 STREET ADDRES	
CITY-ST-ZIP			3.4. C/TY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	s
			4.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		<u></u>	5.2 NAME	
			5.3 STREET ADDRES	,
STREET ADDRESS			i .	1
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
TITLE				
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	5
CITY-ST-ZIP	postilly that the information expedied with	this films shoe not qualify for	6.4 CITY-ST-ZIP	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated	on this annual report or supplemental a	annual report is true and accur	ate 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.				
Block 12 or Block 13 if changed, or on an attachment with an address.				