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 # P97000031367 (0)

DIZ INC

FILED Feb 25 1998 8:00am Secretary of State

F02, 1140-									
Principal Plac	e of Business	Mailir	Mailing Address					1 (01 14 0 1) jiy julia 10011 01114 (01144 00141 0144) jiya 1140 (1440 1440) 1444 (1440 0144) 1440)	
			16864 SILVER OAK CT				-		
16864 SILVER OAK CT DELRAY BEACH FL 33445			DELRAY BEACH FL 33445						DO NOT WRITE IN THIS SPACE
								İ	3. Date Incorporated or Qualified
								i	04/07/1997
2. Principal P	lace of Busine	2a. M	2a. Mailing Address					4. FEI Number Applied For	
21		26						65-0740984 Not Applicable	
Suite, Apt. #, etc			Sı	Suite, Apt. #. etc.					5. Certificate of Status Desired \$8.75 Additional
22			27						Fee Required
City & Stat	6		City & State					6. Election Campaign Financing \$5.00 May Be	
Zip Country			28	Zip Country					Trust Fund Contribution Added to Fees
24	25 Coontry		Fa	29 30		· • • • • • • • • • • • • • • • • • •		Į	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24		nd Address of Curre		ed Ageni	[30]				10. Name and Address of New Registered Agent
715						81	Name		
	ZIEKY, PAUL 16864 SILVER OAK CT					82			
						Street	treet Address (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33445									
						84	City		FL 65 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the							-named	d corpor	
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 o	r printed name of regulated ag-	ent and tillo if ap	plicable (N	OIF Register	red Age	nt signatur	bayinger e	when reinstating) DATE
12.		OFFICERS AN	D DIRECTO	RS	13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1	TITLE			Change Addition
NAME	ZIEKY, E	DWARD N			1.2	NAME			
STREET ADDRESS	16864 SI	LVER OAK CT			1.3	STREET	address		
CITY - ST - ZIP	DELRAY	BEACH FL 33445			1.4	CITY-S	T- 21P		
TITLE	D			DFLETE	2.1	TITLE			Change Addition
NAME	ZIEKY, JO	ON S			2.2	NAME			
STREET ADORESS	%16864	SILVER OAK CT			2.3	STREET	ADDRESS		
CITY-ST-ZIP	DELRAY	BEACH FL 33445			2 4	CITY-S	T-ZIP		
TITLE	D			DELETE	31	TITLE			☐ Change ☐ Addition
NAME		NANCY Z			32	NAME			
STREET ADDRESS		SILVER OAK CT			3.3	STREET	address		
CITY-ST-ZIP	DELRAY	BEACH FL 33445				CITY - S	T-ZIP	<u> </u>	
TITLE				DELETE	ı	TITLE			☐ Change ☐ Addition
NAME					4. 2	NAME		1	
STREET ADDRESS					4.3	STREET	ADDRESS		
CITY - ST - ZIP						CITY-S	T-ZIP	1	
TITLE				DELETE		TITLE			Change Addition
NAME						NAME			
STREET ADDRESS							address		
CITY-ST-ZIP				Therese		CITY - S	T-ZIP		
TITLE				DELETE		TITLE			☐ Change ☐ Addition
NAME					- 1	NAME			
STREET ADORESS							ADDRESS		
CITY-ST-ZIP	L				64	CITY-S	T-ZiP	<u></u>	

SIGNATURE:

EOWARD

232 1470