2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700041665 1. Entity Name ZENITH PROPERTIES, INC.							Secretary of State 02-05-2002 90189 035 ***150.00				
Principal Plac 7730 SW 68 1 MIAMI FL 331	TR		Mailing Address 4761 NW 52 ST COCONUT CREEK FL 33073								
2. Principal P	lace of Business		3. Mailing Address			_		I BEILT BOLL U	1 99 1 (1810 BFIR)	 	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City, & State	e	-	City & State			4. FI	El Number 59-3503843		⊢	plied For	-
Zip Country			Zip	Zip Country			ertificate of Status Desired		\$8.75 Add		1
6. Name and Address of Curren			Pagistared Agent	1	7. Name and Address of New Registered Agent						
	6. Name and A	agress of Current	negistered Agent		Name	7. N	ame and Address of New He	Store on W	ye.n.		1
PINO, JU/	AN			Street Address (P.O. Box Number is Not Acceptable)						┨	
4761 NW				Street Address	\$ (F.O. b)	ox Number is Not Acceptable)				1	
COCONU	T CREEK FL 330	73									
	/ \				City		···	FL	Zip Cod	е	1
9 The above	namad antida	nite this statement fo	or the purpose of changing	ite regieter	ed office or regis	tered and	ent, or both, in the State of Flor				1
8. The above	named entity subv	ilis tris statement ic			ed office of regis	tered age	int, or bong in the otate of the		-0		
SIGNATURE.	J1	111111111111111111111111111111111111111	VAN A PINC					<i>y.1</i> 6	.02		
OKANTONE.	Signature, typed or printe	d name of registered agent	and title if applicable. (N	IOTÉ: Registere	d Agent signature requi	ired when rei	nstating)	DATE			
9. This corpo	oration is eligible to	satisfy its Intangible			IS \$150.00		10. Election Campaign Fina	incing	\$5.0	0 May Be	
•	requirement and el- ria on back)	ects to do so.		After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta			Trust Fund Contribution			to Fees	
`	—————	OFFICERS AND		12.	epartment or o		DITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	S IN 11	-
11.	D	OFFICERS AND	Delete	TITL	E I	الم	SITIONO/ CHANGEO TO CITT	DETIO 7 II 4D	☐ Change	Addition	18
NAME	PALACIOS, RIC	ARDO	Dentity	NAN							3
STREET ADDRESS	10400 SW 33				EET ADDRESS						١
CITY-ST-ZIP	MIAMI FL 3317	2			′-ST-ZIP						غ غ
TITLE NAME	D LUYACIOS, VIC	TOD W	Delete	TITL					Change	☐ Addition	1,
STREET ADDRESS	_10400 SW 33	ST. STE 230			EET ADDRESS						
CITY-ST-ZIP	MIAMI FL 3317			CITY	'-ST-ZIP						
TITLE			☐ Delete	TITL					☐ Change	☐ Addition	
NAME				NAM	ME EET ADORESS						
STREET ADDRESS CITY-ST-ZIP					Y-ST-ZIP						
TITLE			□ Delete	TITL	E	••••			☐ Change	☐ Addition	1
NAME	1			NAM	1E						
STREET ADDRESS	:				EET ADDRESS '-ST-ZIP						
CITY-ST-ZIP		****							☐ Change	☐ Addition	1
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STREET ADDRESS				STR	EET ADDRESS						
CITY-ST-ZIP				CITY	Y-ST-ZIP						4
TITLE			☐ Delete	TITE	l l				Change	☐ Addition	
NAME STREET ADDRESS				NAA STR	EET ADDRESS						
CITY-ST-ZIP				`	/-ST-ZIP						
13. I hereby	certify that the infor	mation supplied wit	h this filing does not qualify	for hejexe	emption stated in	Section 1	19.07(3)(i), Florida Statutes. I	further cer	tify that the i	nformation	7
indicated of the cor	I on this report or si rporation or the rec	upplemental report i eiver or tilustee emp	is true and accurate and the powered to execute this liep	at my sîgna ort as rêqu	iture snall nave th ired by Chapter (ne same I 607, Florid	egal effect as if made under or da Statutes; and that my name	ain; inat i a : appears ii	im an officer n Block 11 o	r Block 12 if	
changed	, or on an attachme	ent with an addless,	with a other like empower	為人					2011	2000 de	$ _{i}$
SIGNAT	URE:	SIGNEY	SINCE OW	13.104	<u> </u>		1.18.02	1).) 71T"	- XXX (1)	16
	CIC	MATRIME AND THREE OR	DOINTED MAKE OF CICNING OFFI	THE OF DIRECT	1750		Date	П	AVUIDE PRODE #		- 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR