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FILED

Jun 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000079186 (7)

1. Corporation Name

ENZA ENTERPRISES, INC.



Principal Place of Business  
14522 NW 88 PLACE  
MIAMI GARDEN FLA. 33018

Mailing Address  
ENRIQUE ZAMORA JR.  
14522 NW 88 PLACE  
MIAMI GARDEN FLA. 33018

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 14522 NW 88 PLACE

Suite, Apt. #, etc

City & State

23 MIAMI, FL

Zip

24 33018

Country

2a. Mailing Address

26 14522 NW 88 PLACE

Suite, Apt. #, etc

City & State

28 MIAMI, FL

Zip

29 33018

Country

30

3. Date Incorporated or Qualified

09/11/1997

4. FEI Number

05-0830039

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROSENTHAL, KERRY E  
2875 N.E. 191ST STREET  
SUITE 500  
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name

GUARDO F. SALINAS

82 Street Address (P.O. Box Number is Not Acceptable)

2827 SW 18 STREET

83

84 City

MIAMI, FL

FL

85 Zip Code

33145

11. Pursuant to the provisions of Sections 607 (5)(2) and 607 (5)(8), 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 of principal officer or registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME ZAMORA, ELSA  
STREET ADDRESS 2875 N.E. 191ST STREET, SUITE 500  
CITY-ST-ZIP AVENTURA FL 33180

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 or supplemental annual report is true and accurate 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.

SIGNATURE:

Elisa C Zamora

(305) 822-2864

CR2E034 (10/97)