

2006 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90412 011 ***150.00

DOCUMENT # P97000099762

1. Entity Name

Z. INVESTMENTS CORP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3000 DUNN AVENUE

3. Mailing Address

3000 DUNN AVENUE

Suite, Apt. #, etc.

SUITE 41

Suite, Apt. #, etc.

SUITE 41

City & State

JACKSONVILLE FL

City & State

JACKSONVILLE FL

4. FEI Number

22-3565930

Applied For

Not Applicable

Zip

32218

Country

USA

Zip

32218

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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40076316

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

POPLAVSKI, ZACK

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

3000 DUNN AVENUE

SUITE 41

City

JACKSONVILLE

FL

Zip Code

32218

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT S
POPLAVSKI, ZACK
3000 DUNN AVE STE 41
JACKSONVILLE FL 32218

TITLE
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DO NOT WRITE
IN THIS SPACE

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: ZACK POPLAVSKI

4-24-06 90476316

CR2E034B (12/01)