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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000008368**1. Corporation Name

ZOLZINA CORPORATION

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90044 035 ***150.00



Principal Place	e of Business	Mailing Address		
1801 NW 75 AVE #213 1801 NW 75 AVE #213				
PLANTATION FL 33313-5194		PLANTATION FL 33313-5194		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				01/26/1998
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
	NW 65th AYE		15252	
Suite, Apt.		Suite, Apt. #, etc.	75000	\$8.75 Additional
22 # /		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing S5.00 May Be
23 PLANTATION, FL. 28 PLAN			ION, FL.	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24 333/ 3 25 USA. 29 <u>3</u> 33/8 3			USA	Personal Property Tax.
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
81 Name				JERRY K. STEIN
STEIN, JERRY K			82 Street Add	dress (P.O. Box Number is Not Acceptable)
- 1801 NW 75 AVE #213			1360	O NW 65th AVE.
PLAN	HTATION-FL-33313-5194		83 ## 4	
			84 City	■■ 85 Zip Code
			I PLA	9N <i>TATION :</i> FL 33 <i>313</i>
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. Sych 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.				
agent. I ai	m familiar with, and accept the obligati	ons of Section 607.0505, Florid	a Statutes.	tion's board of directors. Thereby accept the appointment as registered
SIGNATURE //8/98				
Signature, typed or printed name of registered agent and title applicable. (NOTE: Registered			egistered Agent signature requi	The same of the sa
12.	OFFICIERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PITIS	☐ DÉLETE	1,1 TITLE	
NAME	JERRY K STE	' N	1.2 NAME	
STREET ADDRESS	1360 NW 05H		1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, F	<u>∠, 333/3</u> □ DELETE	1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	2.1 TITLE	Criaige regions
NAME			2.2 NAME	•
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		☐ DELETE	2.4 CITY-ST-ZIP ==	Change Addition
TITLE		_ Detera	3.1 TITLE	C our de la company
NAME			3.2 NAME	
STREET ADDRESS			3 3 STREET ADDRESS	
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Addition
TITLE			4.1 MEE 4.2 NAME	
NAME			4.2 NAME 4.3 STREET ADDRESS	
STREET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME		_ 0	5.2 NAME	
ĺ			5.3 STREET ADDRESS	
STREET ADDRESS			5.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
		_ occir	6.2 NAME	
NAME			6.3 STREET ADDRESS	
STREET ADDRESS			6.4 CITY-ST-ZIP	
CITY-ST-ZIP			0.7 GH (*-31*23F	

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, with all other like empowered.

SIGNATURE: