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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED
May 24, 1999 8:00 am
Secretary of State

05-24-1999 90021 010 ***150.00

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DOCUMENT	#	P98000067250
Corporation Name		. 0000000

Z.M. INTERNATIONAL, INC.

Principal Place of Business 4125 CASTLEBAY DRIVE JACKSONVILLE FL 32257

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

22

Mailing Address

4125 CASTLEBAY DRIVE JACKSONVILLE FL 32257

2a. Mailing Address

27

Suite, Apt. #, etc.



Applied For

Fee Required

Not Applicable \$8.75 Additional

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

07/29/1998

4. FEI Number

City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	p Country			8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax. Yes No	
	9. Name and Address of Current	Registered Agent		81	None	10. Name and Address of New Registered Agent	
MED	ZON CDECORY			81	Name	<u></u> j	
MERZON, GREGORY 4125 CASTLEBAY DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)			
	SONVILLE FL 32257						
JACI	ASSIGNIELE LE 32237			83			
				84	City	FL 85 Zip Code	
11 Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statu	ites, the a	bove	-named co	orporation submits this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was	autnorized	ועסו	the corpor	ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE			F. D			uited when reinstating) DATE	
	Signature, typed or printed name of registered agent a OFFICERS AND		L: Registered	Agen	t signature req	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DTP	□ DELETE	1.1 Ti	ħΕ		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	MERZON, GREGORY	_	1.2 N				
1	4125 CASTLEBAY DRIVE				ADDRESS		
STREET ADDRESS	JACKSONVILLE FL 32257			TY-ST	1		
CITY-ST-ZIP TITLE	SDV	☐ DELETE	2.1 TI		I-ZI	Change Addition	
NAME	ZLOBIN, VALERY		2.2 N	ME			
STREET ADDRESS	4125 CASTLEBAY DRIVE				ADDRESS	Í	
	JACKSONVILLE FL 32257			ITY-S			
CITY-ST-ZIP	ONONOOTTILLE ! E SEES!	☐ DELETE	3.1 TI			Change Addition	
NAME			3.2 N	ME	1	i	
STREET ADDRESS			3.3 S	REET	ADDRESS		
CITY-ST-ZIP				ITY-S		_	
TITLE		☐ DELETE	4.1 TI			☐ Change ☐ Addition	
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 S	REET	ADDRESS		
CITY-ST-ZIP			4.4 C	TY-ST	T-ZIP		
TITLE		DELETE	51 TI	TLE		☐ Change ☐ Addition	
NAME			5.2 N	AME			
STREET ADDRESS			5.3 \$	TREET	T ADDRESS		
CITY-ST-ZIP				TY-\$1	T-ZIP		
TITLE		☐ DELETE	6.1 TI	TLE		☐ Change ☐ Addition	
NAME			6.2 N	AME			
STREET ADDRESS			6.3 S	TREET	TADDRESS		
CITY- ST. 7IP				TY-S			
	certify that the information supplied with	this filing does not qualify	or the exe	mpti	ion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
officer or Block 12	on this annual report or supplemental a director of the corporation or the receiv or Block 13 if changed, or on an attach	er or trustee empowered to ment with an address, with	execute the all other like	his re ke er	eport as re powered.	ture shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in	