

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000021919

**FILED  
Aug 15, 2006  
Secretary of State**

**Entity Name:** ZAM INTERNATIONAL MANAGEMENT & INVESTMENT INC

**Current Principal Place of Business:**

3383 NW 7TH STREET  
#304  
MIAMI, FL 33125 US

**New Principal Place of Business:**

**Current Mailing Address:**

3383 NW 7TH STREET  
#304  
MIAMI, FL 33125 US

**New Mailing Address:**

**FEI Number:** 65-0900533      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZAMORA, CARLOS JR  
3383 N W 7TH STREET  
#304  
MIAMI, FL 33125 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ZAMORA, CARLOS JR  
Address: 3383 N W 7TH ST STE #304  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS ZAMORA

P

08/15/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date