

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000039235

FILED
Jan 05, 2007
Secretary of State

Entity Name: ZAMORA DELIVERIES CORPORATION

Current Principal Place of Business:

7211 WEST 24 AVENUE
#2329
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

7211 WEST 24 AVENUE
#2329
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 65-0928720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAMORA, DANILO
7211 W. 24 AVENUE #2329
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

ZAMORA, NYLIA
7211 W. 24 AVENUE #2329
HIALEAH, FL 33016 US

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: NYLIA ZAMORA

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZAMORA, DANILO
Address: 7211 WEST 24 AVENUE, #2329
City-St-Zip: HIALEAH, FL 33016

Title: VT () Delete
Name: ZAMORA, JAQUELINE
Address: 7211 W. 24 AVENUE, #2329
City-St-Zip: HIALEAH, FL 33016

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZAMORA, NYLIA
Address: 7211 WEST 24 AVENUE, #2329
City-St-Zip: HIALEAH, FL 33016

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

Title: VP () Change (X) Addition
Name: DANILO, ZAMORA
Address: 7211 W 24 AVENUE #2329
City-St-Zip: HIALEAH, FL 33016

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: NYLIA ZAMORA

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date