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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S18421

(5)

ZEILON INVESTMENTS, INC.					
					II ( <b>1</b> 141   1141)   1161   1161   1441
		B4.			
Principal Plac	e of Business	Mailing Address		1 1001/09 101   1001   101/0 0/01   11   11   11	)
713 S ORANGE AVE 713 S ORANGE AVE					
SARASOTA FL 34236 SARASOTA FL 34236				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/27/1990	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0261667	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_	5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6 Shahlar Camaralan Shaharia	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	<ol><li>Name and Address of Currer</li></ol>	nt Registered Agent		10. Name and Address of New Registered	i Agent
ME	RCURIO, JOHN		81 Name		
C/O MERCURIO & BRIDGFORD PA, CPA'S			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
713 S ORANGE AVE				• • • • • • • • • • • • • • • • • • • •	
SA	RASOTA FL 34236		83		
			84 City		85 Zip Code
11 Durayant	to the provisions of Sections 607.050	00 and 607 1600. Florida Chauda		FI	<u>-                                     </u>
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. Such 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.					
	m familiar with, and accept the oblig-	ations of, Section 607.0505, Flo	rida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	ant and title if sopiicable. (NOTE	. Registered Agent signature require	ad when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	ZEILON, INGER		1.2 NAME		
STREET ADDRESS	2403 CASEY KEY RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	NOKOMIS FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ZEILON, ROLF		2.2 NAME		
STREET ADDRESS	2403 CASEY KEY RD		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	NOKOMIS FL D	DELETE	2.4 CiTY-ST-ZIP		Change Addition
NAME	MERCURIO, JOHN J		3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	713 S. ORANGE AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP		
TITLE	O TOTO TATE	☐ DELETE	4.1 TITLE		Change Addition
NAME		_	4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		]
CITY-ST-ZIP			4.4 CITY - ST - ZIP		Ì
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	<del> </del>	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY-ST-ZIP		i

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 of 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.

SIGNATURE:

MYTHEREQUIRED

14/98

(941) 953-4585

**FILED** 

Jan 26 1998 8:00am

Secretary of State