

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 549550 (4)

1. Corporation Name

Zarco Corporation

Principal Place of Business

6105 WALDWICK Circle
Delray Beach, FL 33484
512 NW 87 Ter
Coral

Mailing Address

6105 WALDWICK Circle
Delray Beach, FL 33484

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/91

3a. Date of Last Report

03/29/94

4. FEI Number

65-0290392

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S 199.032,
Florida Statutes ☐ yes ☒ no

2. Principal Place of Business

21 512 NW 87 Terrace

2a. Mailing Address

26 512 NW 87 Terrace

Suite, Apt #, etc

Suite, Apt #, etc

22

27

City & State

23 Coral Springs

City & State

28 Coral Springs

Zip

Country

24 33071

25 U.S.A.

Zip

29 33071

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Robert Smukler
512 NW 87 Ter
Coral Springs FL 33071

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Robert Smukler

Signature of Registered Agent (Typed or Printed Name of Registered Agent and Fee is Applicable)

4/30/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Smukler, Robert D
512 NW 87 Ter
Coral Springs FL 33071

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

000001484540

05/11/95 - 01085-021 Addition

***200.00 ***200.00

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 registered agent 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.

SIGNATURE

Robert Smukler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Smukler

4/14/95

DATE

305-345-5830

TELEPHONE