

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Murtha
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S57753** (3)

1. Corporation Name

ZOVI DISTRIBUTORS & EXPORT, INC.



Principal Place of Business

**7695 N.W. 63RD ST.
MIAMI FL 33166**

Mailing Address

**7695 N.W. 63RD ST.
MIAMI FL 33166**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/06/1991

3a. Date of Last Report

01/19/1995

4. FEI Number

65-0300833

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

10. Name and Address of New Registered Agent

**GONZALEZ, RICHARD, ESQ.
1051 W. 29TH ST.
S-3
HIALEAH FL 33012**

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person performing the filing (not required for this filing)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

**PST
SUAREZ, ZORAIDA L.
1291 REDBIRD AVE.
MIAMI SPRINGS FL**

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

**D
SUAREZ, ZORAIDA L.
1291 REDBIRD AVE.
MIAMI SPRINGS FL**

☐ DELETE

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2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

2. NAME

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2. NAME

3. STREET ADDRESS

4. 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 manager 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:

ZORAIDA SUAREZ **ZORAIDA SUAREZ**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-96 **592-2768**

DATE

EXEMPT FROM FILING

CR2E034 (12/95)