## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # S81065 (2) Corporation Name C.E.Z., INC. Principal Place of Business Mailing Address 13318 DEER CREEK DRIVE 13318 DEER CREEK DRIVE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 3. Date Incorporated or Qualified 3a. Date of Last Report 09/17/1991 04/20/1995 2. Principal Place of Business 2a. Maling Address 4. FEI Number Applied For 26 65-0285041 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zιρ Zφ Country Country 8. This corporation has liability for intangible tax under s 199.032, 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZAHN, CHARLES L. Street Address (P.O. Box Number is Not Acceptable) 13318 DEER CREEK DRIVE 83 PALM BEACH GARDENS FL 33418 84 City Zip Code 85 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 507.0505. Florida Statutes. HARLES LIZAHN SIGNATURE suntered Agent signature OFFICE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILE DELETE 1.171018 Change Addition NAME ZAHN, CHARLES L. 1.2 NAME 13318 DEER CREEK DR STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GRONS FL CITY-ST-ZIP 1.4 CHY - ST - 7IP TITLE DELETE ☐ Change 2 1 TITLE Addition ZAHN, ELAINE F. NAME 2.2 NAME STREET ADDRESS 13318 DEER CREEK DR 2.3 STREET ADDRESS CITY - ST - ZIP PALM BEACH GRONS FL 2.4 C(TY - ST - Z)F TIFLE DELETE 3 1 THILE Change Addition NAME: 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP [] DELETE 4. 1 TOLE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-7IP DELETE 5 1 TITLE Change ☐ Addition 5.2 NAME

6.4 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 receiver or trustee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13.if.atanged, or on an attachment with an others. on an attachment with an coore

5.3 STREET ADDRESS

63 STREET ADDRESS

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6 1 THEE

6.2 NAME

SIGNATURE:

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12.

TITLE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY ST-ZIP

CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR

DELETE

Addition

Change

(12/95)

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