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Feb 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # S84654 (0)

1. Corporation Name  
YVONNE ZIEL TRAFFIC CONSULTANTS, INC.

Principal Place of Business

918 US HIGHWAY ONE  
LAKE PARK FL 33403  
US

Mailing Address

918 US HIGHWAY ONE  
LAKE PARK FL 33403-2832  
US



3. Date Incorporated or Qualified  
09/30/1991

3a. Date of Last Report  
01/23/1996

2. Principal Place of Business

21 11440 86 ST North

Suite, Apt #, etc.

22 WEST PALM BEACH, FL

City & State

23

24 33412 25 US

9. Name and Address of Current Registered Agent  
ZIEL, YVONNE  
11567 BUCKHAVEN LANE  
PALM BCH. GARDENS FL 33412

2a. Mailing Address

26 SAME AS 2

Suite, Apt #, etc.

27

City & State

28

29 30

4. FEI Number  
65-0288669

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

81 Name

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

11440 86 Street North

83

84 City

WEST PALM BEACH, FL

85 Zip Code

33412

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

Signature of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

1/29/97

12. OFFICERS AND DIRECTORS

TITLE PVT  
NAME ZIEL, YVONNE  
STREET ADDRESS 11567 BUCKHAVEN LANE  
CITY-ST-ZIP PALM BCH GARDENS FL

TITLE SD  
NAME ZIEL, YVONNE  
STREET ADDRESS 11567 BUCKHAVEN LANE  
CITY-ST-ZIP PALM BCH GARDENS FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 11440 86 ST North  
1.4 CITY-ST-ZIP WEST PALM BEACH, FL 33412

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Yvonne Ziel

1/29/97 (561) 6247262

CR2E034 (9/96)