

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V06280**

(4)

1. Corporation Name

ZERTON CORPORATION

Principal Place of Business

P.O. BOX 591
WILMINGTON DE 19899

Mailing Address

P.O. BOX 591
WILMINGTON DE 19899

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

9. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES
1201 HAYS ST.
TALLAHASSEE FL 32301**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

01/14/1992

3a. Date of Last Report

05/01/1995

4. FET Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

SIGNATURE

Signature of person or persons, other than the registered agent, authorized to execute this report.

Signature of Registered Agent, if the agent is not the corporation's officer or director.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
SOLLY, JOHN D
15 EAST NORTH ST.
DOVER DE 19903**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
SOLLY, ALEXANDRA E
15 EAST NORTH ST.
DOVER DE 19903**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
PUOUT, SUZANNA
15 EAST NORTH ST.
DOVER DE 19903**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

000001788180

04/22/96 01022 039

*****200.00**

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22-2-96

Date

Daytime Phone #

CR2E034 (12/95)